

**In The Matter Of:**

*STEPSKI v.  
THE M/V NORASIA*

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*ARNOLD MERRIAM*

*July 11, 2008*

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**Word Index included with this Min-U-Script®**

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[1]  
[2] UNITED STATES DISTRICT COURT  
SOUTHERN DISTRICT OF NEW YORK  
[3]  
[4] MICHAEL STEPSKI, KIRSTEN STEPSKI, Wife, :  
[5] GEAL RODERICK AND BENJAMIN SCHROBER,  
[6] Plaintiffs,  
[7] -against- :06 Civ. 1694  
[8] (KMK)  
The M/V NORASIA ALYA, her owners, :  
[9] operators, etc., and MS "ALENA"  
SCHIFFFAHRTSGESELLSCHAFT mbH & CO, KG, :  
[10] PETER DOHLE SCHIFFFAHRTS-KG,  
[11] Defendants.  
[12]  
[13] DEPOSITION of ARNOLD EDWARD MERRIAM, M.D.,  
[14] taken by Defendants at the offices of Blank Rome, 405  
[15] Lexington Avenue, New York, New York, on Friday,  
[16] July 11, 2008, commencing at 1:10 p.m., before Leah  
[17] Alibee, a Registered Professional Reporter and Notary  
[18] Public within and for the State of New York.  
[19]  
[20]  
[21]  
[22]  
[23]  
[24]  
[25]

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[1]  
[2] APPEARANCES:  
[3]  
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Attorneys for Defendants  
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[15] BY: MICHAEL UNGER, Esq., of Counsel  
[16]  
[17]  
[18]  
[19]  
[20]  
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[24]  
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[1]  
[2] IT IS HEREBY STIPULATED AND AGREED  
[3] by and between the attorneys for the respective  
[4] parties hereto that filing and sealing be and the  
[5] same are hereby waived.  
[6] IT IS FURTHER STIPULATED AND AGREED  
[7] that all objections except as to the form of the  
[8] question, shall be reserved to the time of the  
[9] trial.  
[10] IT IS FURTHER STIPULATED AND AGREED  
[11] that the within examination may be signed and  
[12] sworn to before any notary public with the same  
[13] force and effect as though signed and sworn to before  
[14] this Court.  
[15]  
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[1]  
[2] ARNOLD EDWARD MERRIAM, M.D.,  
[3] called as a witness, having been first duly  
[4] sworn by Leah Alibee, a Notary Public  
[5] within and for the State of New York, was  
[6] examined and testified as follows:  
[7] DIRECT EXAMINATION BY MR. UNGER:  
[8] Q: Good afternoon, Doctor. My name  
[9] is Mike Unger. I am one of the attorneys who  
[10] represents the defendants in this case. With me  
[11] is Alan Weigel, who is co-counsel for the  
[12] defendants. I am here this afternoon to take  
[13] your deposition concerning your examinations and  
[14] opinions concerning the plaintiffs, Michael  
[15] Stepski, Geal Roderick and Benjamin Schrober.  
[16] Have you ever been deposed before?  
[17] A: Yes, sir.  
[18] Q: Okay. Now, before we started I  
[19] asked if you had a list of cases in which you  
[20] have previously testified within the last four  
[21] years. And you indicated that you don't have  
[22] such a list?  
[23] A: The last time I testified was  
[24] maybe a year ago and I can tell you the name.  
[25] It was a plaintiff's case. The plaintiff's name

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[1] **Merriam**  
 [2] was Patricia Traina, T-R-A-I-N-A. And I would  
 [3] have to try to find a list of other cases in  
 [4] which I have testified.  
 [5] **Q:** Were you —  
 [6] **A:** I will do my best.  
 [7] **Q:** Okay. Were you asked —  
 [8] **A:** I may have been asked in the  
 [9] context of that trial.  
 [10] **Q:** Okay. What were you asked by  
 [11] either Mr. Healey or Mr. Gargan to provide a  
 [12] list of the cases?  
 [13] **A:** He told me that you would be  
 [14] asking for one. But I just learned that last  
 [15] night, I didn't have a chance to put it  
 [16] together.  
 [17] **MR. UNGER:** Well, I just  
 [18] want to preserve an objection on the  
 [19] record of failure of no list of  
 [20] cases required by the federal rules  
 [21] and to reserve the right to recall  
 [22] the doctor as necessary once the  
 [23] list has been provided.  
 [24] **Q:** But I will try to figure out what  
 [25] cases you have testified for now. If you can,

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[1] **Merriam**  
 [2] the Patricia Traina case?  
 [3] **A:** Uh-huh.  
 [4] **Q:** You said that was a plaintiffs'  
 [5] case?  
 [6] **A:** Correct.  
 [7] **Q:** Meaning that you were acting on  
 [8] behalf of Ms. Traina?  
 [9] **A:** Correct.  
 [10] **Q:** And did you testify in deposition,  
 [11] trial or both?  
 [12] **A:** Trial.  
 [13] **Q:** What court was that?  
 [14] **A:** I don't recall which court it was.  
 [15] **Q:** Here in New York?  
 [16] **A:** Come to think of it, it was one of  
 [17] the — I believe it was one of the courts in  
 [18] Foley Square.  
 [19] **Q:** And who was the plaintiff's  
 [20] attorney who retained you?  
 [21] **A:** I don't recall the name of the  
 [22] firm.  
 [23] **Q:** Did you give a deposition in this  
 [24] case as well?  
 [25] **A:** No, sir.

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[1] **Merriam**  
 [2] **Q:** Did that case have anything to do  
 [3] with posttraumatic stress disorder?  
 [4] **A:** No.  
 [5] **Q:** What other cases have you been  
 [6] involved in?  
 [7] **A:** I am trying to recall the  
 [8] specifics of any other case that I have provided  
 [9] testimony in. I can't right now.  
 [10] **MR. UNGER:** Would you mark  
 [11] that for me, please?  
 [12] (Whereupon, Dr. Merriam's  
 [13] C.V. was received and marked  
 [14] Merriam Exhibit 1 for  
 [15] identification, as of this date.)  
 [16] **Q:** Are there other cases in which you  
 [17] have testified that you just can't remember?  
 [18] **A:** Yes.  
 [19] **Q:** Approximately how many?  
 [20] **A:** I would say a dozen or less.  
 [21] **Q:** Did any of those cases involve  
 [22] posttraumatic stress disorder?  
 [23] **A:** Not to my recollection.  
 [24] **Q:** Let me show you what we have  
 [25] marked Merriam Exhibit 1 for identification.

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[1] **Merriam**  
 [2] Can you tell us what that is, please?  
 [3] **A:** Yes. That's my C.V. which I  
 [4] handed to you.  
 [5] **Q:** Okay. And your C.V. sets forth  
 [6] all of your training and qualifications?  
 [7] **A:** I don't know all my training and  
 [8] qualifications. The essentials thereof.  
 [9] **Q:** By whom are you presently  
 [10] employed?  
 [11] **A:** New York Medical Alliance.  
 [12] **Q:** And what is that?  
 [13] **A:** I am the chairman of psychiatry at  
 [14] the North Bronx Healthcare Network, which is  
 [15] comprised of two hospitals, Jacobi Medical  
 [16] Center and North Central Bronx Hospital. And  
 [17] New York Medical Alliance is the medical group  
 [18] that provides physician services to those  
 [19] hospitals.  
 [20] **Q:** How long have you been involved  
 [21] with New York Medical Alliance?  
 [22] **A:** Since its inception in 1997.  
 [23] **Q:** And before that, by whom were you  
 [24] employed?  
 [25] **A:** I have been at Jacobi Medical

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[1] **Merriam**  
 [2] Center since I completed my training and the  
 [3] organization that provided medical services to  
 [4] the hospital at that time was Albert Einstein  
 [5] College of Medicine, Yeshiva University. That  
 [6] was up through 1996 when Montefiore Medical  
 [7] Center took over the contract for a year. And  
 [8] then in 1997, New York medical Alliance took  
 [9] over the contract.  
 [10] **Q:** You are a professor of psychiatry  
 [11] in neurology at Albert Einstein —  
 [12] **A:** That's correct.  
 [13] **Q:** — College of Medicine?  
 [14] **A:** Yes, sir.  
 [15] **Q:** Okay. Do you actively teach?  
 [16] **A:** Yes.  
 [17] **Q:** Does any of your teaching involve  
 [18] posttraumatic stress disorder?  
 [19] **A:** It has. Right now I am not giving  
 [20] any lectures on P.T.S.D. But I have.  
 [21] **Q:** When was the last time that you  
 [22] were involved in giving lectures on P.T.S.D.?  
 [23] **A:** Probably ten years ago or so.  
 [24] **Q:** And in addition to being a  
 [25] professor, what courses do you currently teach,

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[1] **Merriam**  
 [2] what subject matters?  
 [3] **A:** I regularly teach classes in  
 [4] various neuropsychiatric topics to the Einstein  
 [5] medical students.  
 [6] **Q:** Can you just give me an example?  
 [7] **A:** Yes. I am talking about various  
 [8] neurotoxicological syndromes, such as serotonin  
 [9] syndrome, neuroleptic malignant syndrome. I  
 [10] talk about psychiatric disorders related to  
 [11] neurological problems such as stroke or  
 [12] epilepsy.  
 [13] **Q:** I see you have — just briefly  
 [14] looking over your resume — that you have also  
 [15] had some experience with multiple sclerosis?  
 [16] **A:** Yes, sir.  
 [17] **Q:** Is that one of the areas that you  
 [18] focus on?  
 [19] **A:** My area of primary academic  
 [20] interest has been topics that involve neurology  
 [21] and psychiatry, either psychiatric  
 [22] manifestations of neurologic disease or  
 [23] neurological aspects of psychiatric treatment.  
 [24] **Q:** Do you currently in your practice  
 [25] treat patients?

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[1] **Merriam**  
 [2] **A:** Yes, I do.  
 [3] **Q:** Does any of your treatment involve  
 [4] posttraumatic stress disorder?  
 [5] **A:** I have a few patients I am  
 [6] treating who have P.T.S.D. now.  
 [7] **Q:** About how many?  
 [8] **A:** Probably two or three.  
 [9] **Q:** Has that been the case over the  
 [10] last ten years or so that you have dealt with  
 [11] patients with P.T.S.D. or sometimes you have  
 [12] some patients who have been diagnosed?  
 [13] **A:** Yes. I should explain the nature  
 [14] of my practice.  
 [15] **Q:** I would appreciate that.  
 [16] **A:** Okay. I am a psychiatric  
 [17] consultant to several area long-term care  
 [18] facilities and my private practice chiefly  
 [19] entails those consultations at this point. I  
 [20] formerly had more of a private practice, but my  
 [21] wife contracted cancer in 1999 and I curtailed  
 [22] my hours to consultations in long-term care  
 [23] facilities, which I found was more flexible for  
 [24] my purposes.  
 [25] **Q:** Okay. So going back to treating

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[1] **Merriam**  
 [2] patients who have been diagnosed with P.T.S.D.,  
 [3] over the last say ten years, approximately how  
 [4] many patients have you treated?  
 [5] **A:** Perhaps half a dozen, on a regular  
 [6] basis. There are patients who are admitted to  
 [7] long-term care facilities briefly and for  
 [8] short-term rehab and then return home. So I may  
 [9] have consulted on them during a portion of their  
 [10] stay.  
 [11] **Q:** So when you say "consulted," are  
 [12] you talking about just jumping in and jumping  
 [13] out of a case, not actively being involved in  
 [14] their —  
 [15] **A:** No. I would be managing the  
 [16] medications and verifying the diagnosis,  
 [17] establishing the diagnosis, managing  
 [18] medications. And then working in collaboration  
 [19] with the psychologist who would be doing the  
 [20] psychotherapy.  
 [21] **Q:** Okay. The collaboration with the  
 [22] psychiatrists —  
 [23] **A:** Psychologists.  
 [24] **Q:** Psychologists, thank you.  
 [25] Doing this psychotherapy, what

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(1) **Merriam**  
 (2) does that involve?  
 (3) **A:** The psychologist would be the  
 (4) individual who would be meeting with the patient  
 (5) regularly in therapy. And I would have  
 (6) conversations with the psychologist regarding  
 (7) the patient's progress. If the patient were  
 (8) doing poorly according to the psychologist, the  
 (9) psychologist would alert me, which I would  
 (10) consider making a medication change.  
 (11) **Q:** Does your practice as a private  
 (12) consultant also include diagnosis of patients?  
 (13) **A:** Yes.  
 (14) **Q:** And does it include diagnosis of  
 (15) patients as having P.T.S.D.?  
 (16) **A:** Sure.  
 (17) **Q:** And over the last ten years, about  
 (18) how many patients have you diagnosed with  
 (19) P.T.S.D.?  
 (20) **A:** Again, I would say a dozen or so.  
 (21) **Q:** Have there been patients which  
 (22) others have suspected of having P.T.S.D. that  
 (23) you have examined and concluded that P.T.S.D.  
 (24) was not a proper diagnosis?  
 (25) **A:** I can't recall any such case now,

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(1) **Merriam**  
 (2) but I would think that very likely.  
 (3) **Q:** P.T.S.D. is a term that is thrown  
 (4) around quite a lot these days, would you agree?  
 (5) **A:** It's very much in the news because  
 (6) of the Iraq War.  
 (7) **Q:** Okay. In your opinion, is a  
 (8) clinical psychologist properly able to diagnose  
 (9) P.T.S.D.?  
 (10) **A:** Yes.  
 (11) **Q:** Let me just switch topics a little  
 (12) bit and ask you generally about this case. When  
 (13) were you first contacted?  
 (14) **A:** I think you have a copy of the  
 (15) letter that I received. Can I have my file  
 (16) back?  
 (17) (Handing.)  
 (18) **A:** So this letter is dated March 6,  
 (19) 2007. And that follows a telephone call, I  
 (20) believe, from Mr. Gargan asking me if I would be  
 (21) willing to evaluate three gentlemen who had been  
 (22) involved in a fishing boat accident.  
 (23) **MR. UNGER:** Okay. Let me  
 (24) take a second and ask the reporter  
 (25) to mark the letter as Exhibit 2.

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(1) **Merriam**  
 (2) (Whereupon, March 6, 2007  
 (3) letter, was received and marked  
 (4) Merriam Exhibit 2 for  
 (5) identification, as of this date.)  
 (6) **Q:** We marked Exhibit 2. And that's  
 (7) the March 6, 2007 letter that you were just  
 (8) referring to?  
 (9) **A:** Yes.  
 (10) **Q:** And that was from Mr. Healey?  
 (11) **A:** Yes.  
 (12) **Q:** You said this followed —  
 (13) **A:** A telephone call from Mr. Gargan.  
 (14) I don't remember if I spoke to Mr. Healey or  
 (15) just Mr. Gargan.  
 (16) **Q:** You don't remember if you spoke to  
 (17) Mr. Healey before you received the March 6, 2007  
 (18) letter?  
 (19) **A:** That's correct.  
 (20) **Q:** When was the call from Mr. Gargan?  
 (21) **A:** Sometime before this. I don't  
 (22) recall exactly when.  
 (23) **Q:** Do you have any notes concerning  
 (24) that call?  
 (25) **A:** No, sir.

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(1) **Merriam**  
 (2) **Q:** What did Mr. Gargan say during  
 (3) that call?  
 (4) **A:** He told me that he is serving as  
 (5) counsel on a case of three fishermen who had  
 (6) been involved in an accident at sea and would I  
 (7) be willing to evaluate them psychiatrically.  
 (8) **Q:** Okay. You agreed to do so?  
 (9) **A:** Yes, sir.  
 (10) **Q:** Okay. Did you request any  
 (11) particular records be provided to you?  
 (12) **A:** No. I know Mr. Gargan from  
 (13) previous interaction and I was confident that he  
 (14) would send me what is pertinent.  
 (15) **Q:** What previous interactions had you  
 (16) had with Mr. Gargan?  
 (17) **A:** Mr. Gargan is an attorney for  
 (18) Hill, Betts & Nash. And Hill, Betts & Nash has  
 (19) retained me in previous cases.  
 (20) **Q:** When you were retained previously  
 (21) by Hill, Betts & Nash, was that on the defense  
 (22) side?  
 (23) **A:** Yes.  
 (24) **Q:** How many times had you been  
 (25) retained by Hill, Betts & Nash?

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(1) **Merriam**  
 (2) **A:** I am going to guess two or three.  
 (3) **Q:** Do you recall the names of the  
 (4) plaintiffs involved in those cases?  
 (5) **A:** No, sir.  
 (6) **Q:** Did you testify in any of those  
 (7) cases?  
 (8) **A:** No. I don't recall testifying in  
 (9) a case. It's possible, but I have no  
 (10) recollection of having testified in any of those  
 (11) cases.  
 (12) **Q:** Do you maintain files on those  
 (13) cases?  
 (14) **A:** What I maintain is a list of  
 (15) reports that I have given. And, unfortunately,  
 (16) the hard drive of the computer where I maintain  
 (17) them crashed. So I had to replace the computer.  
 (18) And so — maybe two or three years ago. So all  
 (19) I have on my current computer are reports from  
 (20) the last two or three years. But I can look for  
 (21) you.  
 (22) **Q:** Okay. Do you maintain a physical  
 (23) file under any of those cases that you have been  
 (24) involved in previously?  
 (25) **A:** No. Once a case is completed, I

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(1) **Merriam**  
 (2) don't retain a physical file.  
 (3) **Q:** Okay. Had you ever worked  
 (4) previously with Mr. Healey?  
 (5) **A:** No, sir.  
 (6) **Q:** Now, in this letter of March 6,  
 (7) 2007, which is signed by Mr. Healey, he sets  
 (8) forth a sketch of the circumstances concerning  
 (9) this incident?  
 (10) **A:** Yes.  
 (11) **Q:** Okay. In addition to the  
 (12) rendition that is set forth in the letter, what  
 (13) else were you provided in terms of the  
 (14) information concerning this incident?  
 (15) **A:** I was provided with a report by  
 (16) Gloria Small, Ph.D. I was provided with  
 (17) portions of deposition transcripts related to  
 (18) Mr. Roderick and Mr. Stepski. And notes by  
 (19) Gloria Small. Did I say regarding Mr. Roderick?  
 (20) **Q:** Anything else?  
 (21) **A:** No.  
 (22) **MR. UNGER:** If you could  
 (23) just mark these as the next four in  
 (24) order, please.  
 (25) (Whereupon, handwritten

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(1) **Merriam**  
 (2) notes, typed notes and two portions  
 (3) of transcripts, were received and  
 (4) marked Merriam Exhibits 3, 4, 5 and  
 (5) 6 for identification, as of this  
 (6) date.)  
 (7) **MR. UNGER:** For the record,  
 (8) we have marked as Exhibit 3 five  
 (9) pages of notes, one of which is  
 (10) handwritten. The other four typed,  
 (11) which appear to be from Gloria  
 (12) Small, Ph.D. and they reference  
 (13) Mr. Roderick.  
 (14) **A:** Uh-huh.  
 (15) **Q:** Those are the notes that you were  
 (16) provided concerning Mr. Roderick by Mr. Healey  
 (17) and Mr. Gargan?  
 (18) **A:** I believe that's on this.  
 (19) **Q:** And for the record, we have marked  
 (20) as Exhibit Number 4 three pages, also  
 (21) typewritten, on the letterhead of Dr. Gloria  
 (22) Small. And these reference Michael Stepski.  
 (23) Are those the notes that were  
 (24) provided to you concerning Mr. Stepski by  
 (25) Mr. Healey and Mr. Gargan?

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(1) **Merriam**  
 (2) **A:** Yes, sir.  
 (3) **Q:** Also marked as Exhibit 5 a portion  
 (4) of a deposition transcript of Mr. Roderick,  
 (5) specifically pages 198 through 206.  
 (6) Is that the deposition transcript  
 (7) that you are referring to for Mr. Roderick?  
 (8) **A:** Yes, sir, yes, sir.  
 (9) **Q:** And Exhibit 6 is marked and is the  
 (10) portion of the deposition transcript of Michael  
 (11) Stepski, specifically pages 373 through 378, 381  
 (12) through 314, 416 through 418 —  
 (13) **A:** Wait. You said 381 through what?  
 (14) **Q:** 381 to 413.  
 (15) **A:** Yes.  
 (16) **Q:** 416 through 418?  
 (17) **A:** Yes.  
 (18) **Q:** Page 437?  
 (19) **A:** Yes.  
 (20) **Q:** 445?  
 (21) **A:** Yes.  
 (22) **Q:** And 446?  
 (23) **A:** Correct.  
 (24) **Q:** Is that the extent of the  
 (25) documentation that was provided to you by the



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**Merriam**

[1] plaintiffs' counsel?

[2] **A:** Yes, sir.

[3] **Q:** Throughout the entire time that

[4] you have been involved with these three

[5] plaintiffs?

[6] **A:** That's right.

[7] **Q:** I just want to make sure that you

[8] haven't seen anything else in terms of

[9] documentation.

[10] **A:** No, sir.

[11] **Q:** Okay. And it's fair to say that

[12] you met with Mr. Stepski, Mr. Roderick and

[13] Mr. Schrober?

[14] **A:** I did.

[15] Schober, isn't it?

[16] **Q:** Okay.

[17] **A:** Schober.

[18] **Q:** I think we have been calling him

[19] Schrober throughout the case.

[20] **A:** I think there is no R. Or only

[21] one R, terminal R.

[22] **Q:** Okay. I will try and go with your

[23] pronunciation.

[24] You saw them all on the same day,

[25]

Page 22

**Merriam**

[1] May 19, 2007, correct?

[2] **A:** That's correct.

[3] **Q:** Before you saw the three

[4] plaintiffs, did you have any discussions with

[5] either Mr. Healey or Mr. Gargan concerning the

[6] case, other than the initial telephone

[7] conversation that you had with Mr. Gargan asking

[8] if you would be involved?

[9] **A:** Not to my recollection.

[10] **Q:** Okay. When you are involved in a

[11] litigation, do you keep a file?

[12] **A:** Yes.

[13] **Q:** Do you keep notes of telephone

[14] conversations and put them in that file?

[15] **A:** Generally not.

[16] **Q:** So you do not believe that you

[17] either had a telephone conversation or met in

[18] person with either Mr. Healey or Mr. Gargan or

[19] anybody else from the plaintiffs' side of the

[20] case before you met with these gentlemen on May

[21] 19, 2007; is that right?

[22] **A:** That's correct.

[23] **Q:** Have you ever had any discussions

[24] with an attorney in Connecticut concerning this

[25]

Page 23

**Merriam**

[1] matter?

[2] **A:** Not to my recollection, no.

[3] **Q:** Who set up the appointments on May

[4] 19th?

[5] **A:** I did.

[6] **Q:** Who did you set them up with?

[7] **A:** I don't recall if I spoke to the

[8] men themselves. What I usually do is ask that

[9] the party contact me to arrange the appointment.

[10] But I don't have a specific recollection of how

[11] I made this particular appointment.

[12] **Q:** And what time of day was it

[13] that — I take it you saw Mr. Stepski first; is

[14] that right?

[15] **A:** Yes.

[16] **Q:** Did they all come together at the

[17] same time?

[18] **A:** Yes.

[19] **Q:** Where was the interview with them?

[20] **A:** I have an office in my home.

[21] **Q:** In New Rochelle?

[22] **A:** Correct.

[23] **Q:** What time did they arrive?

[24] **A:** Sometime in the morning.

[25]

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**Merriam**

[1] **Q:** Can you be any more specific than

[2] that?

[3] **A:** No, sir.

[4] **Q:** Did you note their time of arrival

[5] anywhere?

[6] **A:** No.

[7] **Q:** And how long did you spend in

[8] total meeting with the three men?

[9] **A:** I think the total duration was

[10] between four and five hours, if I remember.

[11] **Q:** Did you see them separately or in

[12] a group?

[13] **A:** Separately.

[14] **Q:** Did you ever talk to them together

[15] in a group?

[16] **A:** No.

[17] **Q:** You first saw Mr. Stepski?

[18] **A:** That's right.

[19] **Q:** Who was next?

[20] **A:** I don't recall.

[21] **Q:** Now, you saw them on May 19, 2007.

[22] You prepared reports concerning your interviews,

[23] correct?

[24] **A:** Correct.

[25]

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(1) **Merriam**  
 (2) **Q:** When did you prepare those  
 (3) reports?  
 (4) **A:** I don't recall the date that I  
 (5) prepared the report.  
 (6) **MR. UNGER:** Let me just have  
 (7) these marked as the next three, if  
 (8) we could.  
 (9) (Whereupon, three separate  
 (10) reports and handwritten notes, were  
 (11) received and marked Merriam Exhibits  
 (12) 7, 8, 9 and 10 for identification,  
 (13) as of this date.)  
 (14) **Q:** Let me show you what we have  
 (15) marked as Exhibits 7, 8 and 9. Could you just  
 (16) tell us what those are, please?  
 (17) **A:** Yes. Those are the reports that I  
 (18) wrote regarding the three gentlemen.  
 (19) **Q:** Could I have those back?  
 (20) (Handing.)  
 (21) **Q:** Thank you.  
 (22) Now, you took notes during the  
 (23) course of your interviews?  
 (24) **A:** That's right.  
 (25) **Q:** Let me show what we have marked as

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(1) **Merriam**  
 (2) Exhibit 10.  
 (3) Can you tell me what that is,  
 (4) please?  
 (5) **A:** Yes. These are handwritten notes.  
 (6) **Q:** We have marked them as one  
 (7) exhibit, but they are the handwritten notes  
 (8) concerning your interviews of all three men,  
 (9) correct?  
 (10) **A:** Let me make sure they are all  
 (11) there.  
 (12) Yes.  
 (13) **Q:** Okay. Is it your regular practice  
 (14) to take notes during an interview?  
 (15) **A:** Yes.  
 (16) **Q:** Were you ever asked to conduct an  
 (17) examination of Mrs. Stepski?  
 (18) **A:** No.  
 (19) **Q:** Now, you say you don't remember  
 (20) the exact date that you prepared the reports.  
 (21) But can you give me an estimate in terms of how  
 (22) long it was from May 19, 2007 until when you  
 (23) prepared the reports?  
 (24) **A:** I am really not sure when I  
 (25) prepared them.

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(1) **Merriam**  
 (2) **Q:** A couple of days, a week, a month,  
 (3) shorter, longer?  
 (4) **A:** Months, a few months.  
 (5) **Q:** Several months?  
 (6) **A:** Yes.  
 (7) **Q:** And did you have any discussions  
 (8) with either Mr. Healey or Mr. Gargan subsequent  
 (9) to your interviews with the three men and before  
 (10) you prepared your reports?  
 (11) **A:** No.  
 (12) **Q:** Did you send — prior to preparing  
 (13) your reports — any correspondence to either  
 (14) Mr. Healey or Mr. Gargan?  
 (15) **A:** No.  
 (16) **Q:** When you conducted your  
 (17) interviews, did each interview last about the  
 (18) same period of time? Or did you spend more time  
 (19) with one of the plaintiffs rather than the  
 (20) others?  
 (21) **A:** As I recall, I spent more time  
 (22) with Mr. Stepski.  
 (23) **Q:** Why was that?  
 (24) **A:** There was more material.  
 (25) **Q:** Had you reviewed the transcripts

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(1) **Merriam**  
 (2) of — the portions of the transcript of the  
 (3) depositions and the notes of Gloria Small prior  
 (4) to your interviews with the three men?  
 (5) **A:** Yes.  
 (6) **Q:** And when did you review those  
 (7) materials?  
 (8) **A:** I don't recall.  
 (9) **Q:** Shortly before, within a day or  
 (10) two, was it some period of time longer than  
 (11) that?  
 (12) **A:** I don't recall.  
 (13) **Q:** As you went through your  
 (14) interview, you were taking notes. Did you write  
 (15) down everything that was discussed or only what  
 (16) you believed to be salient facts and  
 (17) observations?  
 (18) **A:** I am not a stenographer. So...  
 (19) **Q:** So only what you believed to be  
 (20) significant you wrote down?  
 (21) **A:** There was no intentional omission  
 (22) of material, if that's what you are asking.  
 (23) **Q:** Okay.  
 (24) **A:** I took the best notes I could of  
 (25) the questions that I asked and the responses.



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*Merriam*

- (1) *Merriam*  
 (2) Q: In addition to the interviews, did  
 (3) you administer any kind of tests to any of the  
 (4) three men?  
 (5) A: No.  
 (6) Q: Is this a reason why you didn't  
 (7) administer any kind of tests?  
 (8) A: There are schedules that can be  
 (9) administered for P.T.S.D. They are generally  
 (10) used in research settings and did not seem to be  
 (11) indicated for the purposes for which I was  
 (12) seeing the men.  
 (13) Q: Now, you were seeing the men not  
 (14) as a clinician to provide any kind of treatment,  
 (15) but solely in order to render an expert report  
 (16) in connection with the litigation; is that  
 (17) correct?  
 (18) A: I was seeing them in order to  
 (19) establish a diagnosis and treatment  
 (20) recommendations. I was not myself intending to  
 (21) treat them.  
 (22) Q: So there was no physician-patient  
 (23) privilege or — I am sorry — physician-patient  
 (24) relationship between yourself and any of the  
 (25) three men; is that right?

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*Merriam*

- (1) *Merriam*  
 (2) A: Well, I did not treat them, no.  
 (3) Q: Okay. You don't consider that  
 (4) there was a physician-patient relationship; is  
 (5) that right?  
 (6) A: I didn't — well, I issued  
 (7) recommendations to them that they should be  
 (8) treated. So to that extent there was a  
 (9) physician-patient relationship, but I wasn't  
 (10) seeing them in order to personally offer them  
 (11) treatment. I didn't write any prescriptions. I  
 (12) didn't arrange any follow-up visits.  
 (13) Q: In your practice as a clinician in  
 (14) treating P.T.S.D. patients, do you typically  
 (15) administer a battery of tests?  
 (16) A: No.  
 (17) Q: Are you aware that there are tests  
 (18) which some clinicians do recommend be performed  
 (19) when dealing with P.T.S.D. patients or potential  
 (20) P.T.S.D. patients?  
 (21) A: There are batteries of tests, yes.  
 (22) Q: Why did you conclude that those  
 (23) tests did not appear to be indicated to be  
 (24) administered in this particular situation?  
 (25) A: Because I conducted clinical

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*Merriam*

- (1) *Merriam*  
 (2) interviews that were designed to see whether or  
 (3) not the individuals had psychiatric signs and  
 (4) symptoms that were commensurate with any  
 (5) psychiatric disorder, recognized psychiatric  
 (6) disorder. So I elicited what I could of their  
 (7) psychiatric signs and symptoms, compared them  
 (8) with known psychiatric disorders, the criteria  
 (9) for known psychiatric disorders. I didn't need  
 (10) a test battery to do that.  
 (11) Q: Okay. Now, going into these  
 (12) interviews, you were aware that Dr. Small had  
 (13) indicated that she believed at least with  
 (14) respect to Stepski and Roderick that they were  
 (15) suffering from P.T.S.D.?  
 (16) A: Yes.  
 (17) Q: Had you drawn any conclusions  
 (18) concerning Dr. Small's observations before  
 (19) seeing either man?  
 (20) A: Did I draw any conclusions?  
 (21) Q: Did you have any thoughts  
 (22) concerning Dr. Small's diagnosis of P.T.S.D.  
 (23) prior to seeing either man?  
 (24) A: No.  
 (25) Q: You just noted that fact, but it

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*Merriam*

- (1) *Merriam*  
 (2) didn't affect the way you went about your  
 (3) interview?  
 (4) A: No.  
 (5) Q: No.  
 (6) What did Mr. Roderick and Schober  
 (7) do while you were having your interview with  
 (8) Mr. Stepski?  
 (9) A: They were in the waiting room.  
 (10) Q: Okay. And —  
 (11) A: If I remember correctly, one of  
 (12) them went out for a cigarette.  
 (13) Q: Was that the case when Mr. Stepski  
 (14) was finished with his interview and you saw  
 (15) whichever was the next man in order —  
 (16) A: Yes.  
 (17) Q: — the two who were not being  
 (18) interviewed hung around in the waiting room?  
 (19) A: Yes.  
 (20) Q: Okay. Do you know if the men in  
 (21) the waiting room had any discussions concerning  
 (22) your interview at any time?  
 (23) A: I wouldn't know.  
 (24) Q: You don't know if Stepski was  
 (25) comparing notes with man number three while you

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(1) **Merriam**  
 (2) were interviewing man number two, in other  
 (3) words?  
 (4) **A:** I don't know.  
 (5) **Q:** Had you asked any of them at any  
 (6) time during your interview if they had  
 (7) previously gotten together to discuss either the  
 (8) case or the approach to your interviews?  
 (9) **A:** I didn't ask.  
 (10) **Q:** Do you know — subsequently, did  
 (11) you ever find out that they had had meetings  
 (12) together in order to discuss the case and to  
 (13) discuss in particular your interviews?  
 (14) **A:** I don't understand your question.  
 (15) Subsequent to what?  
 (16) **Q:** Subsequent to the interviews  
 (17) taking place, did you ever come to learn that in  
 (18) advance of the interviews, the three men had  
 (19) gotten together either separately or with  
 (20) counsel to discuss the interviews?  
 (21) **A:** I have never been told that.  
 (22) **Q:** Okay. And do you know if — have  
 (23) any information as to any meetings that took  
 (24) place either with the three men or with the  
 (25) three men and their counsel subsequent to the

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(1) **Merriam**  
 (2) interviews, in which the interviews were  
 (3) discussed?  
 (4) **A:** I have no information regarding  
 (5) that.  
 (6) **Q:** Let me ask you to refer then,  
 (7) Doctor, to Exhibit 7, which is your report  
 (8) concerning Mr. Stepski?  
 (9) **A:** Okay.  
 (10) (Witness reviewing document.)  
 (11) **Q:** He told you that prior to the  
 (12) incident which took place on May 22, 2004, he  
 (13) had been in, as you write, excellent state of  
 (14) physical and mental health?  
 (15) **A:** That's what he said.  
 (16) **Q:** When you take an interview of any  
 (17) patient, not just these three men, but any  
 (18) patient who you interview in your practice, do  
 (19) you accept everything everybody says as being  
 (20) 100 percent truthful? Or do you sometimes look  
 (21) at it and say, I got to look at this with a  
 (22) clinician's view and take what the patients say  
 (23) with somewhat of a grain of salt?  
 (24) **A:** The latter.  
 (25) **Q:** Okay. Now, Mr. Stepski gave you

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(1) **Merriam**  
 (2) an account of the incident, correct?  
 (3) **A:** That's correct.  
 (4) **Q:** And is that the account that is  
 (5) set out in your report and in your notes? Is  
 (6) that the complete account of what he told you?  
 (7) **A:** Yes.  
 (8) **Q:** You were careful in taking notes  
 (9) concerning the facts of the occurrence?  
 (10) **A:** I tried, yes.  
 (11) **Q:** And that's because, especially in  
 (12) dealing with P.T.S.D., it's important to  
 (13) understand what circumstances the person was  
 (14) exposed to?  
 (15) **A:** Yes.  
 (16) **Q:** Is that fair to say?  
 (17) **A:** Yes.  
 (18) **Q:** You note that he told you as the  
 (19) other boat was approaching, that he felt a sense  
 (20) of emergency?  
 (21) **A:** Yes.  
 (22) **Q:** Did he elaborate on what meant by  
 (23) that?  
 (24) **A:** I think it speaks for itself.  
 (25) **Q:** Okay. I am just trying to put it

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(1) **Merriam**  
 (2) in context. Did he —  
 (3) **A:** He told me he felt this was an  
 (4) emergency, state of emergency.  
 (5) **Q:** Now, he said he visualized the  
 (6) approaching ship in a state of fear as it  
 (7) approached and you wrote "such a strong  
 (8) effect on him"?  
 (9) **A:** That's what he said.  
 (10) **Q:** What did you understand that to  
 (11) mean?  
 (12) **A:** That the state of fear that he was  
 (13) in was intense.  
 (14) **Q:** Now, he said he and his crew saw  
 (15) the other boat approaching theirs and you wrote  
 (16) that he told you that they felt they were going  
 (17) to die. Then he quickly amended — but  
 (18) Mr. Stepski quickly amended that to say that he  
 (19) knew they were going to die. Is there any  
 (20) significance that you attribute to Mr. Stepski's  
 (21) change of wording?  
 (22) **A:** I think he was trying to explain  
 (23) how he felt and he was trying to find the right  
 (24) words and first said, I thought we were going to  
 (25) die and then he said, I knew we were going to

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(1) **Merriam**  
 (2) die. He had a state of conviction that he was  
 (3) about to die.  
 (4) **Q:** Okay.  
 (5) **A:** Is my recollection.  
 (6) **Q:** And he had thoughts of his  
 (7) daughter?  
 (8) **A:** That's what he told me.  
 (9) **Q:** Did he use the word daughter or  
 (10) daughters?  
 (11) **A:** That I don't recall.  
 (12) **Q:** Were you aware that at that time  
 (13) he had two daughters? You said it later in your  
 (14) report. But what I am asking you is —  
 (15) **A:** He has two daughters, two and four  
 (16) years old.  
 (17) **Q:** Right. But had he previously told  
 (18) you before he made the poor daughter remark,  
 (19) that he had two children?  
 (20) **A:** I didn't elicit that he had two  
 (21) children until later.  
 (22) **Q:** Okay.  
 (23) **A:** And it's possible that he said  
 (24) daughters and I wrote down daughter. Or, again,  
 (25) I am not a stenographer. I am taking

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(1) **Merriam**  
 (2) handwritten notes as quickly as I can while I am  
 (3) talking to someone.  
 (4) **Q:** Okay.  
 (5) **A:** So he certainly has two daughters.  
 (6) He may well have said daughters.  
 (7) **Q:** Sitting here today, you don't know  
 (8) if he said daughter or daughters?  
 (9) **A:** Correct.  
 (10) **Q:** Would it be significant if he said  
 (11) daughter as opposed to daughters?  
 (12) **A:** I don't know why he would say  
 (13) daughter instead of daughters. More likely than  
 (14) not he said daughters, but I don't recall.  
 (15) **Q:** You don't remember?  
 (16) **A:** No.  
 (17) **Q:** He said that he estimated the time  
 (18) between having heard the other vessel and the  
 (19) actual collision was between 30 and 60 seconds;  
 (20) is that right?  
 (21) **A:** That's what he said, yes.  
 (22) **Q:** Did you ask him at all what he  
 (23) estimated the other vessel's speed to be?  
 (24) **A:** I don't think I asked him. Nor  
 (25) would it mean anything to me.

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(1) **Merriam**  
 (2) **Q:** Okay. Well, would it be  
 (3) significant if a vessel — if the collision was  
 (4) between two objects that were coming together at  
 (5) a speed of say 20 miles an hour versus two  
 (6) objects coming together at a speed of say  
 (7) 10 miles an hour, five miles an hour or 40 miles  
 (8) an hour, 50 miles an hour?  
 (9) **A:** What was the first part of the  
 (10) question?  
 (11) **Q:** Does the speed of how quickly the  
 (12) two objects that collide are approaching one  
 (13) another impact upon the experience of someone  
 (14) who may have P.T.S.D.? **A:** What affects the P.T.S.D.  
 (15) experience is the danger, the threat. And if  
 (16) the object that is approaching you is very, very  
 (17) large and capable of harming you, I don't think  
 (18) that the speed is critical, if it's — you  
 (19) realize it's coming toward you and that you are  
 (20) in danger. I don't think it matters how much —  
 (21) whether it's coming at five miles an hour or  
 (22) 50 miles an hour.  
 (23) **Q:** Okay. Other than describing that  
 (24) the boat had a bulbous bow, did Mr. Stepski  
 (25)

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(1) **Merriam**  
 (2) describe the other boat?  
 (3) **A:** I had him draw a picture of the  
 (4) relative sizes of the two boats, and that's what  
 (5) that is (indicating).  
 (6) **Q:** That's the second page of Exhibit  
 (7) 10?  
 (8) **A:** Yes.  
 (9) **Q:** Which are your notes?  
 (10) **A:** Yes.  
 (11) **Q:** So that's a picture drawn by  
 (12) Mr. Stepski?  
 (13) **A:** Yes.  
 (14) **MR. UNGER:** Off the record.  
 (15)  
 (16) (Discussion off the record.)  
 (17) **Q:** Other than drawing the picture,  
 (18) did he provide any other description concerning  
 (19) the vessel that hit his boat?  
 (20) **A:** It was substantially larger than  
 (21) his and —  
 (22) **Q:** Did he give you a color or  
 (23) anything like that?  
 (24) **A:** No, sir.  
 (25) **Q:** He was the big boat being —

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(1) **Merriam**  
 (2) **A:** He was the little boat.  
 (3) **Q:** He was the little boat with the  
 (4) big boat bearing down on him and that was enough  
 (5) as far as your interview was concerned?  
 (6) **A:** Correct.  
 (7) **Q:** Okay.  
 (8) **A:** His fear was that the big boat was  
 (9) going to harm him.  
 (10) **Q:** Okay. Mr. Stepski and the other  
 (11) two were on the back end of his boat at the time  
 (12) of his collision, right, that's what he told  
 (13) you?  
 (14) **A:** You know, I don't recall that fact  
 (15) off the top of my head. He told me that his  
 (16) boat was cut in two and that he and the two crew  
 (17) were all on the same portion of the now cut in  
 (18) half boat.  
 (19) **Q:** Okay.  
 (20) **A:** But I don't recall which part of  
 (21) the boat they were standing.  
 (22) **Q:** Are you a boater, by the way?  
 (23) **A:** No. I think you could probably  
 (24) tell that from my answers.  
 (25) **MR. UNGER:** Can we just take

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(1) **Merriam**  
 (2) a break for five minutes?  
 (3) (Recess taken 2:08 p.m. to  
 (4) 2:11 p.m.)  
 (5) **Q:** Before the deposition today, did  
 (6) you review any materials in order to prepare?  
 (7) **A:** I reviewed the materials at hand.  
 (8) **Q:** Okay. The documents we have  
 (9) marked as exhibits?  
 (10) **A:** Correct.  
 (11) **Q:** Did you do anything else to  
 (12) prepare for the deposition?  
 (13) **A:** I looked at the DSM criteria.  
 (14) **Q:** Okay.  
 (15) **A:** Once again.  
 (16) **Q:** Anything else?  
 (17) **A:** No.  
 (18) **Q:** Did you meet with Mr. Gargan or  
 (19) Mr. Healey?  
 (20) **A:** I met with Mr. Gargan.  
 (21) **Q:** When was that?  
 (22) **A:** Earlier in the week.  
 (23) **Q:** Okay. For how long?  
 (24) **A:** About an hour.  
 (25) **Q:** And had you had other meetings

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(1) **Merriam**  
 (2) with either Mr. Gargan or Mr. Healey prior to  
 (3) that?  
 (4) **A:** I have never met Mr. Healey.  
 (5) **Q:** Okay. About this case, I am  
 (6) talking about.  
 (7) **A:** Yes. I have never met Mr. Healey  
 (8) and I think I met with Mr. Gargan one other  
 (9) time. I don't recall.  
 (10) **Q:** Subsequent to preparing your  
 (11) reports?  
 (12) **A:** Correct.  
 (13) **Q:** How long was that other meeting  
 (14) with Mr. Gargan?  
 (15) **A:** Maybe a half hour.  
 (16) **Q:** What was the purpose of that  
 (17) meeting?  
 (18) **A:** I don't even recall.  
 (19) **Q:** Okay. Did you have any of the  
 (20) other men besides Mr. Stepski draw you any  
 (21) pictures or anything?  
 (22) **A:** No.  
 (23) **Q:** Did they bring anything with them  
 (24) to the interviews?  
 (25) **A:** No, sir.

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(1) **Merriam**  
 (2) **Q:** Were they accompanied by anybody?  
 (3) **A:** No, sir.  
 (4) **Q:** Just the three men showed up?  
 (5) **A:** Correct.  
 (6) **Q:** All right. Now, going back to  
 (7) your report on Mr. Stepski?  
 (8) **A:** Yes.  
 (9) **Q:** He said that he was surprised he  
 (10) was alive?  
 (11) **A:** I am trying to recall.  
 (12) **Q:** About seven or eight lines up from  
 (13) the bottom.  
 (14) **A:** Yes.  
 (15) **Q:** Okay. Did he indicate why?  
 (16) **A:** He just described having been —  
 (17) his boat having been in a collision with a  
 (18) larger boat and his boat cut in half.  
 (19) **Q:** Okay.  
 (20) **A:** And anticipating that he was going  
 (21) to die and he didn't die. So it's consistent,  
 (22) feeling surprised that he was still alive.  
 (23) **Q:** Okay. Now, he indicated to you  
 (24) that at the time the three of them were bobbing  
 (25) around in the water 30 miles out at sea after

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[1] **Merriam**

[2] the portion of their boat sank, correct?

[3] **A:** Yes, yes.

[4] **Q:** But subsequently he was able to

[5] have the life raft inflate and then he got cold  
 [6] weather emergent suits for the crew members,  
 [7] correct?

[8] **A:** Yes.

[9] **Q:** And he was able to also find the  
 [10] EPIRB, the signaling device that tells the Coast  
 [11] Guard that there is an emergency and indicates  
 [12] the position of where that particular unit is?

[13] **A:** Yes. Ultimately he located that.

[14] **Q:** Okay. Within a couple of minutes,  
 [15] correct?

[16] **A:** I don't recall the time frame.

[17] But at first he did not see the EPIRB, because  
 [18] it was located on a wall that was no longer

[19] there. And there was also no life raft

[20] initially. So his initial experience was that

[21] he told me that we were just three guys bobbing  
 [22] in the water, shocked to be alive.

[23] **Q:** Well, as I said, ultimately they

[24] all got in the life raft, they all had cold

[25] weather emergent suits put on, they found the

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[1] **Merriam**

[2] EPIRB, turned it on, they found a compass, they  
 [3] found water and some other provisions — I am  
 [4] sorry — beer and some other provisions, right?

[5] **A:** Yes.

[6] **Q:** All within a few minutes, correct?

[7] **A:** I don't recall the number of  
 [8] minutes.

[9] **Q:** Was it significant the length of  
 [10] time that they were exposed in terms of just  
 [11] three guys bobbing around in the sea until they  
 [12] were safe and secure in their life raft with  
 [13] emergent suits on?

[14] **A:** I think the most important thing  
 [15] about that event is that there was a period of  
 [16] time when they were bobbing around and that,  
 [17] first of all, they easily could have been killed  
 [18] by the collision itself. And then were bobbing  
 [19] around in the water with no promise of finding  
 [20] the EPIRB or getting on life suits or having  
 [21] even beer to drink. So that their experience  
 [22] was that they were facing death.

[23] **Q:** Well, Mr. Stepski, according to  
 [24] your report, suggested initially the situation  
 [25] as, his word, hopeless? Very bottom of page

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[1] **Merriam**

[2] one.

[3] **A:** Yes, that's what he said.

[4] **Q:** And then further on, on that same  
 [5] line you note that a few minutes later?

[6] **A:** Yes.

[7] **Q:** The raft, you don't know how long  
 [8] it was, though?

[9] **A:** I don't know.

[10] **Q:** Is the length of time that they  
 [11] were just without the life raft and the other  
 [12] things that they eventually found, is that at  
 [13] all significant in terms of their experience?

[14] **A:** It's potentially of significance.  
 [15] But the facts of the event and the duration of  
 [16] the event is more than sufficient to be  
 [17] classified as a life-threatening event that  
 [18] meets the DSM-IV criteria for P.T.S.D.

[19] **Q:** Okay. So in your opinion, it  
 [20] wouldn't matter if they were only bobbing around  
 [21] in the water for a minute versus an hour, it  
 [22] makes no difference?

[23] **A:** Well, I am not going to say that  
 [24] it makes no difference. The more distress that  
 [25] they are in and the longer that they are in the

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[1] **Merriam**

[2] worse. But this is much, much, much more than  
 [3] bad enough.

[4] **Q:** Now, Mr. Stepski's actions in  
 [5] getting the life raft organized, getting the  
 [6] rope released, actually going in and getting the  
 [7] emergent suits, looking and finding the EPIRB,  
 [8] the provisions, the compass, things like that,  
 [9] shows a presence of mind on his part?

[10] **A:** Yes.

[11] **Q:** Shows that he was capable of  
 [12] rational, coherent thinking?

[13] **A:** Yes.

[14] **Q:** And, in fact, he was acting with  
 [15] prudence in terms of doing the best he could  
 [16] under the circumstances to make their situation  
 [17] as best as could be?

[18] **A:** Yes. As I understood it, he  
 [19] really went into emergency mode and did  
 [20] everything he could to try to survive and try to  
 [21] help his crew survive. And he — I am trying to  
 [22] see where I wrote it. But I recall that he  
 [23] dove — yes. He made several dives into the  
 [24] water to get materials that would help them  
 [25] survive and it was actually dangerous for him to



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(1) **Merriam**  
 (2) do that. But he was in emergency mode, doing  
 (3) everything he could to try to — he had no idea  
 (4) if they would be rescued or when they would be  
 (5) rescued. And he was doing everything he could  
 (6) to try to survive as long as they could.  
 (7) **Q:** You noted that they found beer?  
 (8) **A:** That's what they told me — that's  
 (9) what he told me, yes. Found ketchup, mustard.  
 (10) **Q:** Did you ask if he or any of the  
 (11) other men consumed any of the beer while they  
 (12) were in the life raft?  
 (13) **A:** If I had asked, I would have  
 (14) written it down. So I don't believe I asked.  
 (15) **Q:** Did you ask if any of the men had  
 (16) been drinking beer before the collision?  
 (17) **A:** I don't recall asking that.  
 (18) **Q:** What significance, if any, is it  
 (19) that Mr. Stepski's dog drowned?  
 (20) **A:** He was actually emotionally  
 (21) attached to the dog. That was all. Emotional  
 (22) loss for him.  
 (23) **Q:** Okay. Does that impact one way or  
 (24) the other in terms of your finding that he  
 (25) suffers from P.T.S.D.?

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(1) **Merriam**  
 (2) **A:** No. Even if the dog had lived, it  
 (3) would not have altered my conclusion.  
 (4) **Q:** It's just a factoid in the report?  
 (5) **A:** That's correct.  
 (6) **Q:** You noted that they spent about  
 (7) four hours in the life raft before they were  
 (8) rescued?  
 (9) **A:** That's what Mr. Stepski told me.  
 (10) **Q:** Okay. And you also noted that  
 (11) they heard some ships pass?  
 (12) **A:** Yes.  
 (13) **Q:** He told you that as well?  
 (14) **A:** Yes, sir.  
 (15) **Q:** Did they undertake to try to  
 (16) signal the passing ships, to your knowledge?  
 (17) **A:** I don't recall.  
 (18) **Q:** What else did Mr. Stepski tell you  
 (19) about the incident and the rescue —  
 (20) **A:** That —  
 (21) **Q:** — that's not included in the  
 (22) report?  
 (23) **A:** I don't recall anything that I  
 (24) didn't include in the report. The helicopter  
 (25) was passing by, he assumed it was looking for

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(1) **Merriam**  
 (2) them, but he didn't have any — he was  
 (3) frightened that the helicopter would not find  
 (4) them.  
 (5) **Q:** He was concerned that they might  
 (6) be in the life raft for a considerable period of  
 (7) time?  
 (8) **A:** Yes.  
 (9) **Q:** To your knowledge, did it occur to  
 (10) Mr. Stepski to undertake to try to paddle the  
 (11) life raft either back to the shipping lane or  
 (12) toward the shore?  
 (13) **A:** I don't recall talking about that  
 (14) with him.  
 (15) **Q:** Did Mr. Stepski talk about after  
 (16) they were in the helicopter and his experience  
 (17) with meeting his wife in Cape Cod?  
 (18) **A:** I don't recall talking about that.  
 (19) **Q:** Have you ever talked to  
 (20) Mrs. Stepski?  
 (21) **A:** No.  
 (22) **Q:** Have you ever talked to any of the  
 (23) three plaintiffs at any time other than when you  
 (24) met with them back in May 2007?  
 (25) **A:** No.

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(1) **Merriam**  
 (2) **Q:** Did Mr. Stepski tell you that he  
 (3) went — withdrawn.  
 (4) You mentioned that at first he  
 (5) felt in a state of shock?  
 (6) **A:** That's what he told me.  
 (7) **Q:** Okay. Is that when he got back  
 (8) home? Because the next sentence in your report  
 (9) says he had trouble sleeping?  
 (10) **A:** Yes.  
 (11) **Q:** I am trying to figure out what  
 (12) context of time we are talking about.  
 (13) **A:** Yes. This was acutely.  
 (14) **Q:** That same day?  
 (15) **A:** Yes. Well, yes. The initial day,  
 (16) days.  
 (17) **Q:** Okay. He told the story of the  
 (18) event to the news and to family and friends,  
 (19) okay?  
 (20) **A:** That's what he told me.  
 (21) **Q:** Does that impact one way or the  
 (22) other in terms of your views as to whether he  
 (23) has P.T.S.D. or not?  
 (24) **A:** No.  
 (25) **Q:** Reliving the experience to friends

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*Merriam*

- [1] and media, is that significant?
- [2] **A:** Not necessarily, no. It's
- [3] actually — there are some individuals that
- [4] think that it's good to talk about the emotional
- [5] trauma and there are other people that think
- [6] it's not good. There is no —
- [7] **Q:** It can be cathartic to discuss it?
- [8] **A:** It might be for some people.
- [9] **Q:** There are different views among
- [10] the mental health professionals —
- [11] **A:** Right.
- [12] **Q:** — as to whether that is helpful
- [13] or not?
- [14] **A:** Correct.
- [15] **Q:** In Mr. Stepski's case, did you
- [16] believe it could be helpful or unhelpful that he
- [17] was discussing the events?
- [18] **A:** I didn't determine that.
- [19] **Q:** Is there a reason why you didn't
- [20] determine that?
- [21] **A:** Well, it's long gone.
- [22] **Q:** What's that?
- [23] **A:** I wasn't — I didn't see him in
- [24] the acute stage where I would counsel him.

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*Merriam*

- [1] **Q:** Did you inquire, though, as to
- [2] whether he felt that discussing it was helpful
- [3] or not, unhelpful?
- [4] **A:** No, I didn't inquire.
- [5] **Q:** Okay. You said he then told you
- [6] he stayed home and took a week off of work?
- [7] **A:** Yes.
- [8] **Q:** Did he tell you that, in fact, he
- [9] went back out on other boats during that week
- [10] off?
- [11] **A:** He did not tell me that.
- [12] **Q:** Okay. Would that be significant
- [13] if he had been on other boats in the immediate
- [14] days after the incident?
- [15] **A:** Not necessarily, no. He
- [16] ultimately did go back to sea.
- [17] **Q:** About a week later?
- [18] **A:** About a week later.
- [19] **Q:** He went back looking to recover
- [20] the gear that was still down on the bottom?
- [21] **A:** That's what he told me.
- [22] **Q:** Okay. Now, the state of shock,
- [23] how long did that last?
- [24] **A:** I didn't make a notation about how

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*Merriam*

- [1] long it lasted. I just said at first.
- [2] **Q:** Is it significant one way or the
- [3] other how long a patient is in a state of shock?
- [4] **A:** Not necessarily.
- [5] **Q:** Now, you say once back at sea he
- [6] used binoculars and was on constant lookout for
- [7] other ships. He kept seeing things on the water
- [8] that he thought might have been ships headed for
- [9] him. He was tense and kept his hands clenched.
- [10] What is the significance of those
- [11] observations?
- [12] **A:** It shows hypervigilance for a
- [13] threat and anxiety.
- [14] **Q:** Now, you then note that he
- [15] repeatedly woke up the next man on watch
- [16] prematurely?
- [17] **A:** Yes.
- [18] **Q:** How often did he do that?
- [19] **A:** I don't know. He just said that.
- [20] I wrote repeatedly. It means he did it more
- [21] than once. I don't know.
- [22] **Q:** Was this on the same first trip
- [23] back or on subsequent trips?
- [24] **A:** I don't know the answer to that,

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*Merriam*

- [1] on how many trips.
- [2] **Q:** Well, you are aware that —
- [3] **A:** Hold on. Actually, he told me
- [4] even — if you go down a few paragraphs to the
- [5] second to last paragraph on the page, he told me
- [6] the type of behavior continues, that he doesn't
- [7] trust other people to keep watch, he gets up
- [8] every hour to check on them, because he doesn't
- [9] trust them to effectively keep on the lookout
- [10] for other ships. So he is up for 30 hours at a
- [11] clip except for brief naps.
- [12] So the behavior of not trusting
- [13] others to keep effective lookout is continuous
- [14] through the time that I saw him.
- [15] **Q:** Did he indicate that prior to this
- [16] incident he had been completely trustworthy of
- [17] his other crew members to stand their watch and
- [18] he didn't have to wake up or would wake up?
- [19] **A:** He represented this is a change.
- [20] **Q:** Well, a change from what, though?
- [21] **A:** From his previous demeanor.
- [22] **Q:** Was his previous demeanor that he
- [23] would wake up occasionally or he would never
- [24] wake up at all?

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(1) **Merriam**  
 (2) **A:** I don't know the answer to that.  
 (3) **Q:** So we don't know what the baseline  
 (4) is in terms of the change —  
 (5) **A:** Correct.  
 (6) **Q:** — now?  
 (7) **A:** But he represented it as a change.  
 (8) **Q:** Okay. He said that he considered  
 (9) giving up fishing because he couldn't cope  
 (10) emotionally?  
 (11) **A:** That's what he said.  
 (12) **Q:** Did he elaborate on this?  
 (13) **A:** No.  
 (14) **Q:** Did you inquire further?  
 (15) **A:** Well, he had already told me what  
 (16) his symptoms were, that he was anxious and  
 (17) hypervigilant and found it very stressful and  
 (18) the statement that he was considering giving up  
 (19) fishing was in the context of those emotional  
 (20) complaints that I just enumerated earlier.  
 (21) **Q:** Is it significant at all that he  
 (22) didn't give up fishing, that he continues to  
 (23) fish to this day?  
 (24) **A:** Yes.  
 (25) **Q:** In what way is it significant?

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(1) **Merriam**  
 (2) **A:** He is forced to deal with  
 (3) something that is stressful for him.  
 (4) **Q:** Well, did you have any discussions  
 (5) with him about alternative sources of employment  
 (6) or career income?  
 (7) **A:** My recollection is that this is  
 (8) the only type of work he knows.  
 (9) **Q:** Well, we can agree that nobody is  
 (10) holding a gun to his head saying, you absolutely  
 (11) have to go fishing, you can't do anything else,  
 (12) right?  
 (13) **A:** There was no statement that  
 (14) someone was holding a gun to his head, no.  
 (15) **Q:** Figuratively?  
 (16) **A:** No, there is no one holding a gun  
 (17) to his head.  
 (18) **Q:** Okay. You next note that for four  
 (19) or five months after the incident he went  
 (20) fishing close to shore in a smaller boat.  
 (21) That's what he told you?  
 (22) **A:** That's what he told me.  
 (23) **Q:** He told you that it was one of two  
 (24) other boats that he owned at the time of the  
 (25) collision?

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(1) **Merriam**  
 (2) **A:** I didn't go into any further  
 (3) detail about that. What he told me was that it  
 (4) was frightening and anxiety provoking for him to  
 (5) go to sea. So he tried to fish using a smaller  
 (6) boat, less far away from the shoreline to try  
 (7) and get used to being on a boat. And like to  
 (8) try and do something less dangerous in an  
 (9) attempt to get back on the horse, so to speak.  
 (10) **Q:** Did he share with you that the  
 (11) other smaller boat he was using during this  
 (12) period of time was actually not set up or  
 (13) capable of being used for the type of offshore  
 (14) fishing that he was doing at the time of the  
 (15) collision?  
 (16) **A:** No. We didn't talk about that.  
 (17) **Q:** What else did Mr. Stepski share  
 (18) with you concerning his activities in the  
 (19) several months after the collision?  
 (20) **A:** Nothing that is not recorded in my  
 (21) notes.  
 (22) **Q:** So he didn't tell you that he was  
 (23) soon after the collision in the market for  
 (24) purchasing a replacement boat for the one that  
 (25) sank?

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(1) **Merriam**  
 (2) **A:** I don't recall that we spoke about  
 (3) that.  
 (4) **Q:** Then he purchased such a boat and  
 (5) used that boat then to go out fishing and he  
 (6) continues to use that boat to go fishing  
 (7) offshore?  
 (8) **A:** I don't know about that.  
 (9) **Q:** Any significance about the fact  
 (10) that he ultimately did as soon as he was able to  
 (11) replace the boat that sank and went back to  
 (12) doing the same kind of fishing that he was doing  
 (13) at the time?  
 (14) **A:** In terms of P.T.S.D.?  
 (15) **Q:** Yes.  
 (16) **A:** The significant thing about  
 (17) P.T.S.D. is that he continues to experience  
 (18) symptoms, even though he has returned to his  
 (19) vocation, it's with symptoms.  
 (20) **Q:** Well, we will get to the symptoms.  
 (21) But any other significance in respect to  
 (22) P.T.S.D. that he is back to doing the same  
 (23) activities?  
 (24) **A:** There are some cases of P.T.S.D.  
 (25) where people are unable to surmount their

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*Merriam*

[1] symptoms enough to return to work. Other people  
[2] can.

[3] Q: All right. You mentioned that  
[4] Mr. Stepski considers himself permanently  
[5] changed?

[6] A: That's what he told me.

[7] Q: In what way?

[8] A: I will read what he told me.

[9] Q: Right.

[10] A: Which is that he is now much more  
[11] aware of danger when he is at sea, he feels that  
[12] he is a nervous wreck. He said that he checks  
[13] and rechecks excessively, that he is preoccupied  
[14] with thoughts of boats sinking, how boats can  
[15] sink.

[16] Q: Let me just stop you right there.

[17] A: Okay.

[18] Q: Do you agree that fishing,  
[19] commercial fishing is a dangerous occupation?

[20] A: Intrinsically dangerous  
[21] occupation?

[22] Q: Yes.

[23] A: I don't know enough about it to  
[24] know. I think it is more dangerous than being a

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*Merriam*

[1] doctor or an attorney. But I don't know how  
[2] much more dangerous it is than other  
[3] occupations.

[4] Q: You are not aware that  
[5] statistically commercial fishermen suffer some  
[6] of the highest rates of on-the-job accidents  
[7] among any kind of employment?

[8] A: I don't know what those statistics  
[9] are.

[10] Q: Now, in terms of a nervous wreck,  
[11] did he describe what he meant by that?

[12] A: I think it speaks for itself, he  
[13] is nervous.

[14] Q: Then he checks and rechecks, his  
[15] word, excessively?

[16] A: I don't know that his word was  
[17] excessively or mine.

[18] Q: Okay. What is excessive?

[19] A: Excessive means that after  
[20] checking for something, you immediately check  
[21] again, because you don't trust your — what your  
[22] senses told you the first time that you checked.

[23] Q: Well, what was he checking and  
[24] rechecking? What things?

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*Merriam*

[1] A: For oncoming ships.

[2] Q: Okay. So he was talking about

[3] checking his radar and keeping a lookout?

[4] A: Yes. Checking the radar and the  
[5] horizon, yes.

[6] Q: And you say later on down, "While  
[7] at sea scans the horizon for other ships." Not  
[8] a bad idea, huh?

[9] A: Not a bad idea. But it's  
[10] something that could be done calmly or it's  
[11] something that could be done with anxiety or  
[12] it's something that could be done excessively.

[13] Q: And he says he does it excessively  
[14] and it's —

[15] A: Without confidence that he is  
[16] safe.

[17] Q: And he is anxious about it, true?

[18] A: Yes.

[19] Q: Subjective?

[20] A: Yes.

[21] Q: Okay. You indicate that he no  
[22] longer looks forward to going out to sea —

[23] A: That's what he told me.

[24] Q: — anymore.

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*Merriam*

[1] Again, there is no way to measure  
[2] this desire to go out to sea or is there?

[3] A: No, there is no way to measure  
[4] that.

[5] Q: Okay. For awhile he dread going  
[6] out, but now he no longer dreads going out?

[7] A: That's what he said.

[8] Q: Okay. How long did he dread going  
[9] out?

[10] A: I don't know.

[11] Q: Did you ask?

[12] A: I don't recall I asked.

[13] Q: Okay. He now experiences no  
[14] enthusiasm and no drive?

[15] A: That's what he said.

[16] Q: Are there tests that can be given  
[17] to someone to measure their job satisfaction?

[18] A: There are not tests. There are  
[19] scales.

[20] Q: Scales?

[21] A: Yes.

[22] Q: Okay. Is there any way —

[23] A: It's just a way of quantifying

[24] subjective responses. It's not an objective

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[1] **Merriam**  
 [2] test.  
 [3] Q: He has reduced the quantity of his  
 [4] catch and, therefore, his income?  
 [5] A: That's what he told me.  
 [6] Q: You haven't seen any records?  
 [7] A: No, sir.  
 [8] Q: Do you know anything as to how  
 [9] Mr. Stepski's income relates vis-a-vis other  
 [10] commercial fishermen?  
 [11] A: No idea.  
 [12] Q: And he is less aggressive?  
 [13] A: That's what he told me.  
 [14] Q: What did you understand that to  
 [15] mean?  
 [16] A: He explained that the skipper of  
 [17] the boat has choices to make about where he is  
 [18] going to sail the boat in search of fish. And  
 [19] that he is less willing to take chances and more  
 [20] conservative and this has caused his catch to  
 [21] decline. And he just wants to finish his work  
 [22] and get back to shore.  
 [23] Q: He goes on to say that he finds  
 [24] his mind dwells on bad things that he hears on  
 [25] the news?

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[1] **Merriam**  
 [2] A: That's what he said.  
 [3] Q: How often, did he indicate?  
 [4] A: No. He didn't tell me how often  
 [5] that happens.  
 [6] Q: Or how long he dwells?  
 [7] A: He didn't tell me.  
 [8] Q: Did you discuss with him any  
 [9] strategies as to how not to dwell on these bad  
 [10] things that he hears on the news?  
 [11] A: No.  
 [12] Q: There are strategies for doing  
 [13] that, correct?  
 [14] A: Yes.  
 [15] Q: Part of the therapy?  
 [16] A: Yes.  
 [17] Q: And he also told you that these  
 [18] bad things that he hears now affect him in a way  
 [19] that they didn't before?  
 [20] A: That's what he said.  
 [21] Q: In what way do they affect him?  
 [22] Did he say?  
 [23] A: He just said that they affect him  
 [24] emotionally. So he has a more disturbing  
 [25] quality to bad news.

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[1] **Merriam**  
 [2] Q: He said he finds it difficult to  
 [3] be happy?  
 [4] A: That's what he said.  
 [5] Q: And he worries all of the time?  
 [6] A: That's what he said.  
 [7] Q: Okay. And you quoted both of  
 [8] those statements?  
 [9] A: Yes.  
 [10] Q: Any significance to that?  
 [11] A: It was approximating his words.  
 [12] Q: Okay. And he had a fear that his  
 [13] children might be kidnapped?  
 [14] A: That's what he told me.  
 [15] Q: Did you discuss that with him,  
 [16] this fear, in any detail?  
 [17] A: No. He just told me that he was  
 [18] now worried that his children might be kidnapped  
 [19] and that he has thoughts about terrible things  
 [20] that would happen to them if they were. But we  
 [21] didn't describe them.  
 [22] Q: Is there a relevance to these  
 [23] thoughts that he has concerning his children?  
 [24] A: I interpret this as another  
 [25] example of exaggeration of threats and the

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[1] **Merriam**  
 [2] environment that is typical of P.T.S.D.  
 [3] Q: He told you about putting four  
 [4] fire extinguishers in his house?  
 [5] A: Yes. He told me that he put four  
 [6] fire extinguishers in his home and that he knew  
 [7] that this was many more than was needed. I  
 [8] think he told me that only one were called for.  
 [9] But that he was anxious and trying to soothe  
 [10] himself by trying to be as safe as he possibly  
 [11] could.  
 [12] Q: Do you find that four fire  
 [13] extinguishers in a house that has a fireplace, a  
 [14] downstairs apartment, a garage, and a kitchen is  
 [15] excessive?  
 [16] A: I haven't seen the home.  
 [17] Q: Okay. Well, would it be excessive  
 [18] if there was a rational need for having —  
 [19] A: Not if there was a rational need.  
 [20] Q: Okay. But he thought that this  
 [21] was a response to his anxiety?  
 [22] A: That's what he told me.  
 [23] Q: Did he comment further on that?  
 [24] A: No.  
 [25] Q: Did you go into it any further?



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*Merriam*

- [1] **A: No.**  
 [2] **Q: You said he feels cut off from**  
 [3] **other people?**  
 [4] **A: That's what he said.**  
 [5] **Q: Now, did you discuss the change in**  
 [6] **his relationships with others?**  
 [7] **A: He told me that he was unable to**  
 [8] **relate to other people the way he used to.**  
 [9] **Q: And they find him strange?**  
 [10] **A: He said that he thought other**  
 [11] **people find him strange. But he also felt that**  
 [12] **he was unable to relate emotionally with other**  
 [13] **people.**  
 [14] **Q: Do you contribute any significance**  
 [15] **to that?**  
 [16] **A: Yes. That's compatible with the**  
 [17] **P.T.S.D. criteria of — I don't recall the**  
 [18] **criteria exactly. Feelings of detachment or**  
 [19] **estrangement from others.**  
 [20] **Q: Did you go into any further detail**  
 [21] **concerning his claimed change in relationship**  
 [22] **with others?**  
 [23] **A: No, no. That's something that**  
 [24] **would be appropriate to go into during therapy.**  
 [25]

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*Merriam*

- [1] **Q: He made the one remark, you noted**  
 [2] **it and you moved on?**  
 [3] **A: Yes.**  
 [4] **Q: You said that he has feelings of**  
 [5] **inner sadness and negative thoughts?**  
 [6] **A: Yes.**  
 [7] **Q: Did you discuss that with him any**  
 [8] **further?**  
 [9] **A: Yes. He told me he didn't — he**  
 [10] **previously enjoyed his job as a fisherman and**  
 [11] **didn't anymore.**  
 [12] **Q: So the sadness and negative**  
 [13] **thoughts are related to his work?**  
 [14] **A: Well, he told me specifically that**  
 [15] **his work was affected by the feelings of**  
 [16] **sadness. But that there was no — the feelings**  
 [17] **of sadness were much more pervasive than just**  
 [18] **being about his work. He told me that it would**  
 [19] **be fine with him if he died. He didn't want to**  
 [20] **kill himself. But it would be fine if he**  
 [21] **passed, because he was generally so sad and**  
 [22] **unhappy now. And so this did affect his career,**  
 [23] **but it was not limited to his career.**  
 [24] **Q: Okay. Anything else on that**  
 [25]

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*Merriam*

- [1] **point?**  
 [2] **A: He said that he never felt that**  
 [3] **way earlier in his life and that his children**  
 [4] **were very important to him and that was the**  
 [5] **reason why he didn't want to die.**  
 [6] **Q: Any comments or observations that**  
 [7] **you have in respect to those statements by**  
 [8] **Mr. Stepski?**  
 [9] **A: None come to mind right now.**  
 [10] **Q: They impact upon your opinions**  
 [11] **professionally concerning Mr. Stepski's**  
 [12] **diagnosis?**  
 [13] **A: Yes. I think it shows how**  
 [14] **profoundly his emotional life was changed by the**  
 [15] **accident. That something very important to him,**  
 [16] **namely his role as a commercial fisherman, was**  
 [17] **altered by the accident. And that he — while**  
 [18] **he wasn't suicidal, life had lost its**  
 [19] **satisfaction for him.**  
 [20] **Q: Okay. Again, these are subjective**  
 [21] **statements?**  
 [22] **A: Yes.**  
 [23] **Q: There is no objective way of**  
 [24] **measuring one's sadness or joy?**  
 [25]

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*Merriam*

- [1] **A: No, no.**  
 [2] **Q: Different things can make people**  
 [3] **sad and different things can make people happy?**  
 [4] **A: That's correct.**  
 [5] **Q: The fact that Mr. Stepski returned**  
 [6] **to smoking after the accident, does that have**  
 [7] **any impact upon your opinions?**  
 [8] **A: Smoking is a notoriously difficult**  
 [9] **habit to quit. And the fact that he resumed**  
 [10] **smoking is pretty typical for someone who is**  
 [11] **experiencing a life stress. And he told me that**  
 [12] **he didn't even want to quit anymore. He**  
 [13] **previously wanted to quit and no longer cared.**  
 [14] **That's another example of how his life was**  
 [15] **changed by the events.**  
 [16] **Q: Now, you discussed his sleeping**  
 [17] **patterns?**  
 [18] **A: Yes.**  
 [19] **Q: Okay. And he told you that he has**  
 [20] **difficulty falling asleep unless he has a few**  
 [21] **beers?**  
 [22] **A: That's what he told me.**  
 [23] **Q: How many beers?**  
 [24] **A: He said a few.**  
 [25]

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(1) **Merriam**  
(2) **Q:** What do you understand "a few" to  
(3) be?  
(4) **A:** I don't have a number associated  
(5) with a few.  
(6) **Q:** Two, three, four?  
(7) **A:** That's what most people mean by a  
(8) few. It's very hard to quantify when people  
(9) tell you frequently distorted numbers to those  
(10) sorts of things.  
(11) **Q:** Did he tell you how often he has  
(12) problems falling asleep?  
(13) **A:** He indicated regularly. I didn't  
(14) inquire the exact frequency.  
(15) **Q:** Did you inquire as to whether  
(16) there had been a change in his ability to fall  
(17) asleep from shortly after the accident to the  
(18) time of your interview?  
(19) **A:** He had trouble falling asleep  
(20) immediately after the accident. And I saw him  
(21) quite a while later and the trouble was  
(22) persistent. Whether it's improved a little bit  
(23) in comparison with the immediate wake of the  
(24) accident, I don't know.  
(25) **Q:** Well, when he was discussing

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(1) **Merriam**  
(2) having trouble falling asleep, how many times a  
(3) week did he tell you?  
(4) **A:** It appeared to be regular,  
(5) frequent. But I don't have an exact frequency.  
(6) It wasn't an occasional time.  
(7) **Q:** You don't know if it's once a  
(8) week, twice a week, every night?  
(9) **A:** No. I don't know the frequency.  
(10) But it appeared to be a problem for him that was  
(11) a regular facet of his falling asleep. So that  
(12) I do not think it was once or twice a week.  
(13) **Q:** You wrote that he experienced  
(14) nightmares several times a week?  
(15) **A:** Yes.  
(16) **Q:** Do you know if that changed in any  
(17) way over the course of time?  
(18) **A:** I do not know.  
(19) **Q:** Did he discuss the contents of his  
(20) nightmares?  
(21) **A:** He told me he couldn't recall the  
(22) content.  
(23) **Q:** And he awakens from sleep about  
(24) once a week?  
(25) **A:** In a state of fear.

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(1) **Merriam**  
(2) **Q:** In a state of fear?  
(3) **A:** Yes.  
(4) **Q:** Fear about what? Did he  
(5) elaborate?  
(6) **A:** No, he didn't elaborate. Just a  
(7) state of fear. But he awakens frequently and  
(8) can't get back to sleep. And then wakes in a  
(9) state of fear about once a week, he said.  
(10) **Q:** And had that awakening at night in  
(11) a state of fear changed in frequency from the  
(12) time of the incident?  
(13) **A:** I don't know. But it was  
(14) continuous through the time when I saw him.  
(15) **Q:** Is it significant that problems in  
(16) terms of sleeping, nightmares, waking up, these  
(17) sort of behaviors change from the time of the  
(18) incident or shortly after the incident as time  
(19) passes?  
(20) **A:** Typically they are more intense  
(21) early on. But the importance is that the  
(22) problem is a persistent problem.  
(23) **Q:** So if —  
(24) **A:** In other words, it hasn't gone  
(25) away.

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(1) **Merriam**  
(2) **Q:** So unless it goes away totally,  
(3) it's still a problem in your book?  
(4) **A:** Totally or near totally. Yes.  
(5) When I saw him it was three years after the  
(6) accident. It wasn't fresh in the wake of the  
(7) accident. So these are now persistent problems.  
(8) And he did say it was a change, because prior to  
(9) the accident he said he slept soundly and had no  
(10) nightmares at all.  
(11) **Q:** Okay. You also note that  
(12) Mr. Stepski indicated he experienced frequent  
(13) mental imagery of a ship coming out of a fog  
(14) occasioned by an emotional sense of imminent  
(15) death. Did you ask him how often he has these  
(16) experiences?  
(17) **A:** Yes. He told me a few times a  
(18) week.  
(19) **Q:** Was there any change in frequency  
(20) in respect of those, the images?  
(21) **A:** The frequency appeared to be  
(22) variable depending on his activity. So he said  
(23) they were more often when he would be going back  
(24) out to sea, before he went on another trip or if  
(25) he is out to sea and in the fog.

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**Merriam**

[1]  
[2] **Q:** When you questioned him, did you  
[3] ask him if he was experiencing those images  
[4] presently as opposed to in the past?

[5] **A:** Yes. They were ongoing, they were  
[6] in the present.

[7] **Q:** And you questioned him concerning  
[8] his sleep and he said —

[9] **A:** That was in the present, yes.

[10] **Q:** A few times a week, meaning how  
[11] many, approximately?

[12] **A:** A few typically means two to  
[13] three.

[14] **Q:** But he didn't say?

[15] **A:** He didn't say.

[16] **Q:** Okay. You wrote that the images  
[17] are powerful, but not accompanied by feeling  
[18] that he is actually back at the scene of the  
[19] accident?

[20] **A:** Yes.

[21] **Q:** Any significance to the fact that  
[22] he doesn't feel that he is back at the scene of  
[23] the accident?

[24] **A:** Yes. Some people in P.T.S.D. have  
[25] actual reexperiencing, almost like a

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**Merriam**

[1] hallucination.

[2] **Q:** Flashbacks is another word for  
[3] that?

[4] **A:** Yes. But these are not actual  
[5] hallucinations. He is aware of the current  
[6] reality, even though he has a mental image that  
[7] is associated with an emotional state.

[8] **Q:** Now, the fact that he has these  
[9] images, what is the significance of that in  
[10] terms of your diagnosis?

[11] **A:** It's compatible with the  
[12] reexperiencing criteria of P.T.S.D. Namely that  
[13] the afflicted person continues to have —  
[14] experiences abnormal experiences based on the  
[15] event.

[16] **Q:** Now, you also note that he said he  
[17] was troubled by these images and he wished that  
[18] they would stop?

[19] **A:** Yes.

[20] **Q:** What did you take that to mean?

[21] **A:** That they were emotionally  
[22] distasteful to him. They weren't something that  
[23] he was merely experiencing without emotion, but  
[24] that they were troubling.  
[25]

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**Merriam**

[1]  
[2] **Q:** Now, if one had had an accident  
[3] say skidding on ice and snow and running into a  
[4] tree, having images of that happening, would  
[5] that be a compatible example of the same type of  
[6] thing that Mr. Stepski was describing?

[7] **A:** I don't understand the question.

[8] **Q:** If years ago I had had an accident  
[9] driving along where I skidded on ice or snow and  
[10] I ended up into a tree and now when there is ice  
[11] or snow as I am driving, I have these images of  
[12] running into the tree, would that be a similar  
[13] type of example as to what Mr. Stepski was  
[14] describing to you?

[15] **A:** Same type of category. I can't —  
[16] a mental event. In terms of the intensity of it  
[17] and the intensity of danger in which you felt  
[18] yourself when you skidded into the tree compared  
[19] to his, there is no way to compare it.

[20] **Q:** Now, you said he had experienced  
[21] panic attacks, but they weren't a major problem  
[22] for him?

[23] **A:** Yes.

[24] **Q:** Did he describe what these panic  
[25] attacks were all about?

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**Merriam**

[1] **A:** Periods of time, less than a  
[2] minute, in which he felt powerful sensations of  
[3] fear.

[4] **Q:** Did he tell you what triggered  
[5] them in his experience?

[6] **A:** He, actually, did not complain  
[7] very much about these. He said they only  
[8] happened a few times a year, lasted less than a  
[9] minute each. So they were not major events for  
[10] him.

[11] **Q:** Did he indicate that there had  
[12] been a change in frequency of having panic  
[13] attacks over the course of time?

[14] **A:** We did not discuss that.

[15] **Q:** Would the fact that he had related  
[16] that he had panic attacks be significant in  
[17] terms of your diagnosis?

[18] **A:** Yes. It's another example of an  
[19] anxiety related symptom. P.T.S.D. is an anxiety  
[20] disorder. The chief thing that I took from this  
[21] actually is that I thought he was being quite  
[22] honest with me, telling me that he had this  
[23] symptom. But it wasn't particularly  
[24] troublesome. He wasn't trying to come up with a  
[25]

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[1] **Merriam**  
 [2] laundry list of various symptoms. This was  
 [3] something he told me about only after I  
 [4] inquired. And there didn't seem to be any  
 [5] tendency to try to inflate its significance. So  
 [6] I thought it represented that he was being  
 [7] honest with me.  
 [8] **Q:** You note that he said that he  
 [9] experienced chronic anxiety that he would lose  
 [10] his business, his family and his home. What did  
 [11] he tell you about that?  
 [12] **A:** That he worries about those  
 [13] things.  
 [14] **Q:** What does "chronic anxiety" mean  
 [15] to you?  
 [16] **A:** That he is now worrying. Anxiety  
 [17] is worrying.  
 [18] **Q:** Right. Did he indicate how often  
 [19] he worries and how significant these worries  
 [20] are?  
 [21] **A:** Frequent basis. Again, these are  
 [22] things that would be gone into more in the  
 [23] context of psychotherapy. But he told me that  
 [24] he had persistent worries about his future,  
 [25] about the security of his business, economics of

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[1] **Merriam**  
 [2] the family.  
 [3] **Q:** Chronic?  
 [4] **A:** Chronic means persistent, yes.  
 [5] **Q:** And at the time, did you discuss  
 [6] the fact that his wife was pregnant?  
 [7] **A:** I am trying to recall. I don't  
 [8] recall that.  
 [9] **Q:** And would the fact that his wife  
 [10] was pregnant with an unplanned child tend to  
 [11] cause one to have anxiety concerning security  
 [12] about one's business and income future in  
 [13] general?  
 [14] **A:** Well, he didn't say to me, listen,  
 [15] I just found out my wife is pregnant and now I  
 [16] am really uptight about it. That's not what he  
 [17] was saying. He is saying this is something that  
 [18] has been a problem for him chronically since his  
 [19] accident and that he feels worried about the  
 [20] future. He feels like, God knows what is going  
 [21] to happen next type of feeling.  
 [22] **Q:** What I am inquiring about is  
 [23] whether other factors in this man's life could  
 [24] be a source of some of the anxiety which he was  
 [25] describing to you?

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[1] **Merriam**  
 [2] **A:** He didn't describe his wife's  
 [3] pregnancy to me, as far as I recollect.  
 [4] **Q:** Well, could that cause one to be  
 [5] anxious?  
 [6] **A:** Yes.  
 [7] **Q:** Emotional?  
 [8] **A:** Yes.  
 [9] **Q:** Especially where the child is not  
 [10] planned and one might be concerned about  
 [11] finances and supporting another child?  
 [12] **A:** Yes, it could.  
 [13] **Q:** Okay.  
 [14] **A:** But, again, he didn't tell me that  
 [15] this was situational. What he told me was that  
 [16] it was —  
 [17] **Q:** Well, he said that he felt  
 [18] insecure about his future and he worried what's  
 [19] coming around the corner, right?  
 [20] **A:** Yes.  
 [21] **Q:** Could the fact that his wife was  
 [22] pregnant play into those statements?  
 [23] **A:** He didn't indicate to me that,  
 [24] look, I am having a baby and I am really worried  
 [25] about it. What he told me was there was a

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[1] **Merriam**  
 [2] general sense of being insecure about his future  
 [3] and this had been for sometime now, since he had  
 [4] been in the accident. And that's a very typical  
 [5] statement in P.T.S.D. that one has a  
 [6] foreshortened sense of future, can't think with  
 [7] any security about what is going to be.  
 [8] **Q:** Did he describe for you that he  
 [9] started to become concerned and anxious about  
 [10] his future either immediately or shortly after  
 [11] the incident? Did he use those words?  
 [12] **A:** Yes. The description of the  
 [13] symptoms was in the context of him telling me in  
 [14] what ways he is emotionally changed since his  
 [15] accident.  
 [16] **Q:** Is that also noted in your  
 [17] handwritten notes?  
 [18] **A:** I don't know the answer to that.  
 [19] But what I asked him was, tell me what emotional  
 [20] problems you have now that you attribute to the  
 [21] accident and he told me.  
 [22] **Q:** He told you that he was anxious?  
 [23] **A:** He told me all of these things.  
 [24] **Q:** What I am asking you is, did the  
 [25] anxiousness about his future arise in his words



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**Merriam**

[1] **Merriam**  
 [2] soon after the incident, or did you get any time  
 [3] frame at all from him as to when the anxiousness  
 [4] about his future started to be a concern to him?

[5] **A:** The account was that these  
 [6] symptoms began after the accident and persisted.  
 [7] There is no description by him that and then  
 [8] three years out, suddenly I have got this new  
 [9] symptom. These are all things that occurred in  
 [10] the wake of the accident and persisted.

[11] **Q:** Can we agree that there is no date  
 [12] we can look to on a calendar after — on or  
 [13] after May 22, 2004, that anybody can say, that's  
 [14] the date I started to feel anxious, that's the  
 [15] date I started to feel concerned about my  
 [16] future?

[17] **A:** That's correct.

[18] **Q:** Now, you say when he is aboard a  
 [19] boat, he feels hypervigilant for signs of  
 [20] potential danger. Is that your word or his?

[21] **A:** Hypervigilance, my word.

[22] **Q:** What did he say to you concerning  
 [23] being on the lookout for signs of potential  
 [24] danger?

[25] **A:** I would have to look in my

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**Merriam**

[1] **Merriam**  
 [2] handwritten notes and see what I wrote.

[3] **Q:** Let ask you this question then —

[4] **A:** He didn't use the word  
 [5] hypervigilant. I would be surprised if he knew  
 [6] what the word hypervigilant means.

[7] **Q:** Okay.

[8] **A:** But whatever he said it was the  
 [9] equivalent of that, that he's excessively  
 [10] looking for signs of danger.

[11] **Q:** Well, is that a normal reaction  
 [12] for somebody who has been involved in an  
 [13] accident to be on the lookout for signs of  
 [14] danger?

[15] **A:** Is it normal, no. Being  
 [16] hypervigilant is abnormal. It's an abnormal  
 [17] state. And the degree of hypervigilance, if  
 [18] it's in the context of a life-threatening event  
 [19] and it's associated with the other symptoms,  
 [20] then it's P.T.S.D.

[21] Can an individual with a — who  
 [22] has been in an accident have isolated  
 [23] hypervigilance, sure.

[24] **Q:** Let me ask you another question.

[25] If one has been involved in an accident that was

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**Merriam**

[1] **Merriam**  
 [2] partially their fault and then in the future  
 [3] becomes more vigilant in terms of making sure  
 [4] that they are following better safety practices,  
 [5] you agree with me that's a good thing?

[6] **A:** Sure. Typically people who get  
 [7] caught speeding keep a closer eye on their  
 [8] speedometer. Some people.

[9] **Q:** If you have a car accident because  
 [10] you are following somebody too close or you are  
 [11] trying to pass or do something reckless and you  
 [12] curtail that behavior, that is a good and normal  
 [13] reaction, hopefully, right?

[14] **A:** Yes.

[15] **Q:** Now, you next wrote in your report  
 [16] that these feelings persist?

[17] **A:** Can we just take a break at some  
 [18] point?

[19] **Q:** Oh, yes. Sure. Let me just  
 [20] finish this one question.

[21] **A:** Sure.

[22] **Q:** You write "these feelings persist,  
 [23] but are becoming less intense."

[24] I am just trying to figure out  
 [25] which feelings you are talking about, the

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**Merriam**

[1] **Merriam**  
 [2] hypervigilance or the anxiety that you were  
 [3] talking about before?

[4] **A:** The hypervigilance.

[5] **Q:** And becoming less intense, did he  
 [6] describe it in any way that was quantifiable?

[7] **A:** No.

[8] **Q:** What does this impact upon your  
 [9] diagnosis and views?

[10] **A:** It doesn't change the diagnosis at  
 [11] all.

[12] **Q:** Does it support the diagnosis or

[13] **A:** Neither supports nor unsupports.  
 [14] The fact that he has hypervigilance three years  
 [15] afterwards is significant. The fact that he's  
 [16] telling me it's becoming less intense, once  
 [17] again I actually took an indication that he was  
 [18] being honest with me and not trying to  
 [19] exaggerate his symptoms and say that everything  
 [20] is at the max and never getting better, as some  
 [21] people do. But he was being pretty factual.

[22] **Q:** Okay. You want to take a minute  
 [23] or two break?

[24] (Recess taken 3:19 p.m. to 3:26  
 [25]



Page 89

[1] **Merriam**  
 [2] p.m.)  
 [3] **Q:** Switching gears, Mr. Stepski's  
 [4] relationship with his wife. You indicated that  
 [5] he said he has feelings of blame toward his  
 [6] wife. In what respect?  
 [7] **A:** We didn't go into it in any great  
 [8] detail. But that, obviously, the relationship  
 [9] is now strained.  
 [10] **Q:** Does he blame his wife for his  
 [11] current condition?  
 [12] **A:** No. He blamed the accident for  
 [13] his current condition.  
 [14] **Q:** What does he blame his wife for?  
 [15] **A:** I don't know. Again, this would  
 [16] be something in therapy that would come up to  
 [17] explore.  
 [18] **Q:** What, if any, significance does  
 [19] the change in the relationship with his wife  
 [20] have with respect to your diagnosis?  
 [21] **A:** It's not pivotal for the  
 [22] diagnosis. But many patients with P.T.S.D. have  
 [23] trouble with close relationships with loved  
 [24] ones.  
 [25] **Q:** Is that one of the symptoms of

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[1] **Merriam**  
 [2] P.T.S.D.?  
 [3] **A:** It is.  
 [4] **Q:** What about the anger management  
 [5] and substance abuse classes that he has been  
 [6] required to attend?  
 [7] **A:** Yes.  
 [8] **Q:** How does that relate?  
 [9] **A:** Anger management, irritability and  
 [10] angry behavior is another typical symptom of  
 [11] P.T.S.D. But it's also common behavior.  
 [12] **Q:** Do you know if he attended the  
 [13] classes?  
 [14] **A:** I would assume so. But I don't  
 [15] know for sure.  
 [16] **Q:** Are these incidents related to the  
 [17] collision?  
 [18] **A:** Well, he told me that since the  
 [19] accident, they are arguing more and that he is  
 [20] more short tempered. She feels him to be more  
 [21] short tempered. In which case it's likely  
 [22] related to the P.T.S.D.  
 [23] **Q:** Fair to say that most patients  
 [24] with P.T.S.D. have a loss of appetite?  
 [25] **A:** No, not necessarily.

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[1] **Merriam**  
 [2] **Q:** Okay. What about decrease in  
 [3] sexual drive? Is that common among P.T.S.D.?  
 [4] **A:** It's common, but it's not  
 [5] necessary.  
 [6] **Q:** Could be caused by any number of  
 [7] factors?  
 [8] **A:** Yes.  
 [9] **Q:** Could be caused by —  
 [10] **A:** Could be caused by depression.  
 [11] **Q:** It could be caused by the fact  
 [12] that his wife is pregnant and they have had a  
 [13] baby, right?  
 [14] **A:** Oh, he did tell me that his wife  
 [15] is pregnant, I am sorry, the last sentence on  
 [16] the page he did tell me that his wife was  
 [17] pregnant.  
 [18] **Q:** He noted avoiding thinking about  
 [19] fishing?  
 [20] **A:** I am sorry. While on sexual  
 [21] drive, he told me that since the accident his  
 [22] sexual drive is diminished and he attributed  
 [23] this to his feelings of being tense, in which  
 [24] case it would be related to the accident.  
 [25] **Q:** He avoids thinking about fishing?

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[1] **Merriam**  
 [2] **A:** That's what he said.  
 [3] **Q:** What significance is that in  
 [4] respect to your diagnosis?  
 [5] **A:** Another symptom of P.T.S.D. is  
 [6] that people try to avoid things that remind them  
 [7] of the stimulus that caused the P.T.S.D. So  
 [8] something may have been pleasurable in the past  
 [9] to think about and now it's something that is  
 [10] distressing.  
 [11] **Q:** You noted he considered changing  
 [12] careers. Did you discuss to what?  
 [13] **A:** No, I didn't.  
 [14] **Q:** Current alcohol use of two to six  
 [15] beers a day, is that normal, excessive?  
 [16] **A:** I think it's excessive. Six beers  
 [17] a day is excessive.  
 [18] **Q:** Well, did he tell you how often he  
 [19] has six beers versus two beers?  
 [20] **A:** No. But this is excessive, he is  
 [21] drinking daily. If he had two beers a day, it  
 [22] would be at the limit of what is acceptable.  
 [23] But he is drinking significantly more than that.  
 [24] And he is drinking up to two six-packs. And  
 [25] this is a change in his consumption. Previously

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[1] **Merriam**

[2] he drank two or three days a week and now he is  
 [3] drinking every day. It's excessive.

[4] **Q:** What impact did that have on your  
 [5] diagnosis?

[6] **A:** Well, he told me that he is trying  
 [7] to medicate himself. The substance abuse,  
 [8] alcoholism and substance abuse are frequently  
 [9] complications of P.T.S.D. He told me he was  
 [10] trying to use alcohol as a medication to relieve  
 [11] his anxiety.

[12] **Q:** Do you think Mr. Stepski is an  
 [13] alcoholic?

[14] **A:** Well, he fulfills some of the  
 [15] criteria. He has tried to cut back  
 [16] unsuccessfully. He hasn't had withdrawal  
 [17] symptoms. He is drinking excessively and he's  
 [18] unsuccessfully tried to reduce his consumption.  
 [19] So I think he is right on the edge of  
 [20] alcoholism.

[21] **Q:** Okay. And do you attribute that  
 [22] to the accident?

[23] **A:** It may well be. Prior to the  
 [24] accident he was only drinking two or three days  
 [25] a week. Now he is drinking daily.

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[1] **Merriam**

[2] **Q:** Well, there is a family history of  
 [3] alcoholism, right?

[4] **A:** Yes, there is.

[5] **Q:** So people —

[6] **A:** If there is a family history,  
 [7] there is a family history of alcoholism.  
 [8] Alcoholism and drug abuse are probably the most  
 [9] common complications of P.T.S.D. And if there  
 [10] is a prior history of drinking, then the — I am  
 [11] sorry. Strike. I didn't remember what I was  
 [12] going to say.

[13] **Q:** Okay. Well, is it your belief  
 [14] that his alcoholism, if he is an alcoholic, is  
 [15] caused by the collision as opposed to being  
 [16] caused by predisposition based on a family  
 [17] history, or is it a combination?

[18] **A:** It's a combination.

[19] **Q:** When you conducted your exam,  
 [20] right —

[21] **A:** Yes.

[22] **Q:** — you noted he expressed full  
 [23] range of mood?

[24] **A:** Yes.

[25] **Q:** His affect was appropriate?

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[1] **Merriam**

[2] **A:** Yes.

[3] **Q:** No observable psychomotor signs of  
 [4] excessive anxiety?

[5] **A:** Correct.

[6] **Q:** He was coherent?

[7] **A:** Correct.

[8] **Q:** No signs of any thought disorders?

[9] **A:** Correct.

[10] **Q:** Grounded in reality?

[11] **A:** Correct.

[12] **Q:** Effectively sitting there having a  
 [13] conversation with you, but for him telling you  
 [14] that he subjectively had these symptoms of  
 [15] anxiety, he appears perfectly normal, correct?

[16] **A:** Which is — yes, which is the case  
 [17] in P.T.S.D.

[18] **Q:** Okay. Now, Mr. Stepski told you  
 [19] all of these symptoms that he attributes to the  
 [20] accident, correct?

[21] **A:** Correct.

[22] **Q:** As a doctor, which of his  
 [23] symptoms, if any, do you attribute to the  
 [24] accident?

[25] **A:** I think I enumerated them in my

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[1] **Merriam**

[2] conclusions. He has intrusive recollections of  
 [3] the event; he avoids things that remind him of  
 [4] the event; he did not want to return to fishing;  
 [5] he has difficulty thinking ahead of the  
 [6] remainder of his life; he has trouble staying  
 [7] asleep; he has had outbursts of anger; he is  
 [8] hypervigilant; looking for threats; and his  
 [9] situation distresses him. And I attributed  
 [10] those to the P.T.S.D.

[11] **Q:** So all of these things that he  
 [12] related to you subjectively, if you take them at  
 [13] his word that he does, in fact, experience these  
 [14] symptoms —

[15] **A:** Yes. There is no objective test  
 [16] for P.T.S.D.

[17] **Q:** Right. Okay.

[18] Now, did you consider what other  
 [19] stressors in his life may be causing any of  
 [20] these symptoms that you note in your conclusion?

[21] **A:** He did not describe any other  
 [22] stressors.

[23] **Q:** He didn't describe any financial  
 [24] problems?

[25] **A:** I don't recall discussing

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(1) **Merriam**  
 (2) financial problems.  
 (3) **Q:** Did he describe any other events  
 (4) in his life which could impact upon stressors  
 (5) and/or serve as stressors? Such as, did he tell  
 (6) you that he had been involved in a significant  
 (7) auto accident several years back?  
 (8) **A:** No. We did not discuss an auto  
 (9) accident.  
 (10) **Q:** Okay. Is that the type of event  
 (11) which could impact upon his situation and —  
 (12) **A:** Well, an auto accident is not  
 (13) going to make you frightened to go fishing. An  
 (14) auto accident is not going to make you scan the  
 (15) horizon for threats when you are at sea. The  
 (16) specifics of what he is fearing and anxious  
 (17) about are specifically related to the event at  
 (18) sea.  
 (19) **Q:** Well, running over your children  
 (20) as you back out of the driveway, would that be  
 (21) more related to an auto accident as opposed to a  
 (22) collision at sea?  
 (23) **A:** Could be related to either.  
 (24) **Q:** Let me ask you to switch to  
 (25) Mr. Roderick.

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(1) **Merriam**  
 (2) **MR. GARGAN:** That's Exhibit  
 (3) 8?  
 (4) **MR. UNGER:** Exhibit 8, yes.  
 (5) **Q:** Did you discuss with Mr. Roderick  
 (6) in detail his version of the accident?  
 (7) **A:** Yes.  
 (8) **Q:** And you took notes as to what he  
 (9) told you?  
 (10) **A:** Yes.  
 (11) **Q:** They are all in what we have  
 (12) marked as Exhibit 10?  
 (13) **A:** Yes.  
 (14) **Q:** And that includes pretty much  
 (15) everything he told you; is that right?  
 (16) **A:** Yes.  
 (17) **Q:** You note that when Mr. Roderick  
 (18) first got back to shore, he had frequent  
 (19) flashbacks. Did he discuss those with you?  
 (20) **A:** I am trying to —  
 (21) **Q:** Third paragraph down.  
 (22) **A:** That's what he told me, yes.  
 (23) **Q:** Did he discuss the flashbacks in  
 (24) any detail?  
 (25) **A:** No.

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(1) **Merriam**  
 (2) **Q:** He didn't talk about what he was  
 (3) recalling or how frequent?  
 (4) **A:** No.  
 (5) **Q:** What triggered the flashbacks,  
 (6) none of that information?  
 (7) **A:** No, no. Mr. Roderick is a less  
 (8) articulate individual.  
 (9) **Q:** Well, did you ask him any of those  
 (10) questions?  
 (11) **A:** Yes.  
 (12) **Q:** Did he just not respond or what  
 (13) did he say when you asked him what were the  
 (14) flashbacks all about?  
 (15) **A:** I don't recall specifically asking  
 (16) him the content of the flashbacks. But...  
 (17) **Q:** Okay. He returned to going back  
 (18) on boats with his father within a couple of  
 (19) days, correct?  
 (20) **A:** Within six days.  
 (21) **Q:** Yes. Although he said he was  
 (22) distracted?  
 (23) **A:** He said he was nervous, yes.  
 (24) **Q:** He was back at it?  
 (25) **A:** Yes.

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(1) **Merriam**  
 (2) **Q:** He got back in the saddle?  
 (3) **A:** Yes.  
 (4) **Q:** Right. And he said his father  
 (5) pushed him to do it?  
 (6) **A:** Yes.  
 (7) **Q:** He forced himself because —  
 (8) **A:** Yes.  
 (9) **Q:** Because of his father?  
 (10) **A:** Yes.  
 (11) **Q:** Is that a positive thing to get  
 (12) back in the saddle when you fall off the horse?  
 (13) **A:** It can be for some people.  
 (14) **Q:** Okay. Was it for Mr. Roderick in  
 (15) your view?  
 (16) **A:** I don't have a view about that.  
 (17) **Q:** He said that it continues to  
 (18) bother him to leave shore because of a  
 (19) persistent sense of fear?  
 (20) **A:** That's what he told me.  
 (21) **Q:** But this has gotten better over  
 (22) time, right?  
 (23) **A:** He said he still has to push  
 (24) himself, is what he told me.  
 (25) **Q:** But did you discuss with him

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(1) **Merriam**

(2) whether it's any easier now for him to be back  
 (3) at it working on the boats than it was  
 (4) initially?

(5) **A:** I don't think I inquired or if I  
 (6) did, I didn't write it down.

(7) **Q:** What did he relate to you which  
 (8) caused you to note that he was hypervigilant  
 (9) while at sea?

(10) **A:** He said that he looked for signs  
 (11) of threats. He said what when it's foggy, he is  
 (12) very apprehensive, even if he is driving his  
 (13) car.

(14) **Q:** Anything else?

(15) **A:** He said looking for threats and  
 (16) that he was very, very nervous and that's  
 (17) improved, now he is more comfortable, except  
 (18) when he is in the fog.

(19) **Q:** Okay. Well, being in the fog when  
 (20) you are out on a boat, would you agree that even  
 (21) not having been involved in a collision with  
 (22) another vessel, it's an anxiety producing  
 (23) experience?

(24) **A:** I would say it's probably  
 (25) something that makes many people anxious.

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(1) **Merriam**

(2) **Q:** Okay.

(3) **A:** But he was describing a change  
 (4) that he is now more anxious when he is at sea  
 (5) and the fog.

(6) **Q:** Again, hypervigilant was your  
 (7) word, not his?

(8) **A:** Yes, that's correct.

(9) **Q:** In terms of Mr. Roderick's sleep,  
 (10) you noted he is able to fall asleep, but he  
 (11) wakes up a couple of times a night, but doesn't  
 (12) have any nightmares?

(13) **A:** Right. He awakens three to four  
 (14) times a night.

(15) **Q:** Did you discuss whether there has  
 (16) been any change in frequency?

(17) **A:** Oh, may I add something to a  
 (18) previous answer?

(19) He did tell me about the content  
 (20) of the flashbacks. He said that the flashbacks,  
 (21) he has mental imagery of being on the raft and  
 (22) it happens over and over. And that for the  
 (23) first two years, these occurred daily and then  
 (24) became less frequent.

(25) And then he had been required to

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(1) **Merriam**

(2) give a deposition, I guess to you folks, and  
 (3) after the deposition and having to repeat the  
 (4) various details of his experiences, they got  
 (5) worse and then they got better again and were  
 (6) occurring intermittently. So he did describe  
 (7) them in more detail.

(8) **Q:** What is intermittently?

(9) **A:** Non-continuously. You know, once  
 (10) and —

(11) **Q:** Once and again?

(12) **A:** Once and again. I don't know the  
 (13) frequency. But, again, this is typical of  
 (14) P.T.S.D., that once one has the disorder, it  
 (15) will wax and wane, symptoms will wax and wane  
 (16) and symptoms will become accentuated if there  
 (17) are life stresses, especially life stresses that  
 (18) remind one of the accident.

(19) **Q:** Okay.

(20) **A:** And he told me that the flashbacks  
 (21) were mental images of the impact and of being on  
 (22) the raft.

(23) **Q:** Is that, having flashbacks, is  
 (24) that a symptom of P.T.S.D.?

(25) **A:** Yes.

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(1) **Merriam**

(2) **Q:** That's something that you — his  
 (3) flashbacks are something that you attribute to  
 (4) the accident?

(5) **A:** Yes.

(6) **Q:** Now, his relationship with his  
 (7) wife or girlfriend, as the case may be —

(8) **A:** I think it's his girlfriend.

(9) **Q:** — it wasn't healthy before the  
 (10) accident, right?

(11) **A:** That's what he told me.

(12) **Q:** To your belief, did the accident  
 (13) impact on that relationship?

(14) **A:** He told me they had actually  
 (15) broken up six to seven months before the  
 (16) accident.

(17) **Q:** Okay. So the accident then, in  
 (18) terms of his personal relationship with his  
 (19) ex-wife, former girlfriend, however you want to  
 (20) describe her, is annulity; is that correct?

(21) **A:** He didn't describe any impact of  
 (22) the accident on that relationship.

(23) **Q:** Okay. He saw Dr. Small?

(24) **A:** Yes.

(25) **Q:** Only a couple of times, right?